



roup work services

for blind children in sighted settings
a community program

*a report and manual based on
a four year collaborative project of*
THE JEWISH GUILD FOR THE BLIND
and
BRONX HOUSE

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THE JEWISH GUILD FOR THE BLIND

and

BRONX HOUSE



Compiled and edited

by

Shura Saul

Report on "Intake"

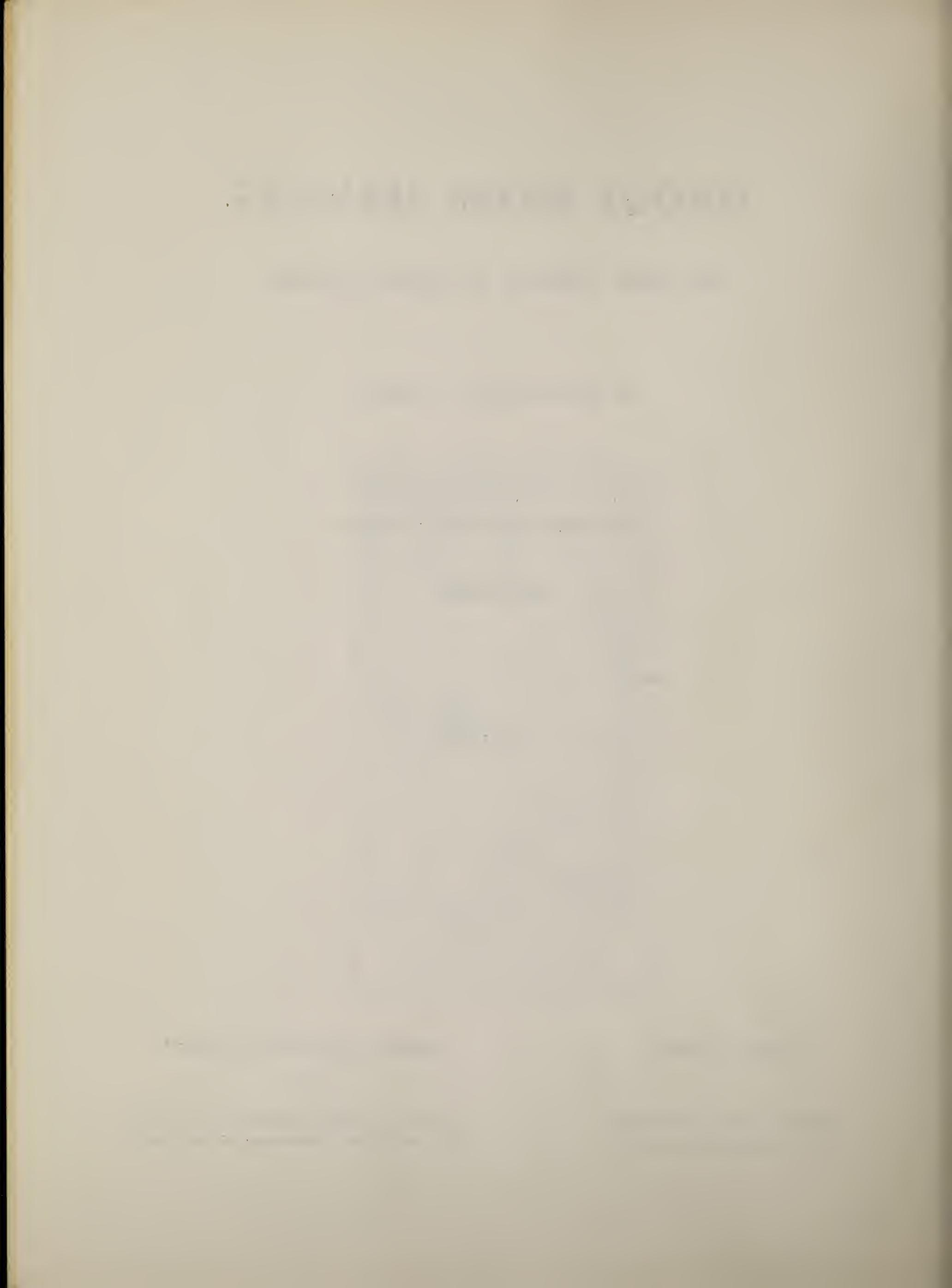
by

Ada Kozier, senior Case Worker
The Jewish Guild for the Blind

Appendix "Eye Conditions in Children"

by

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New York State Commission for the Blind



FOREWORD

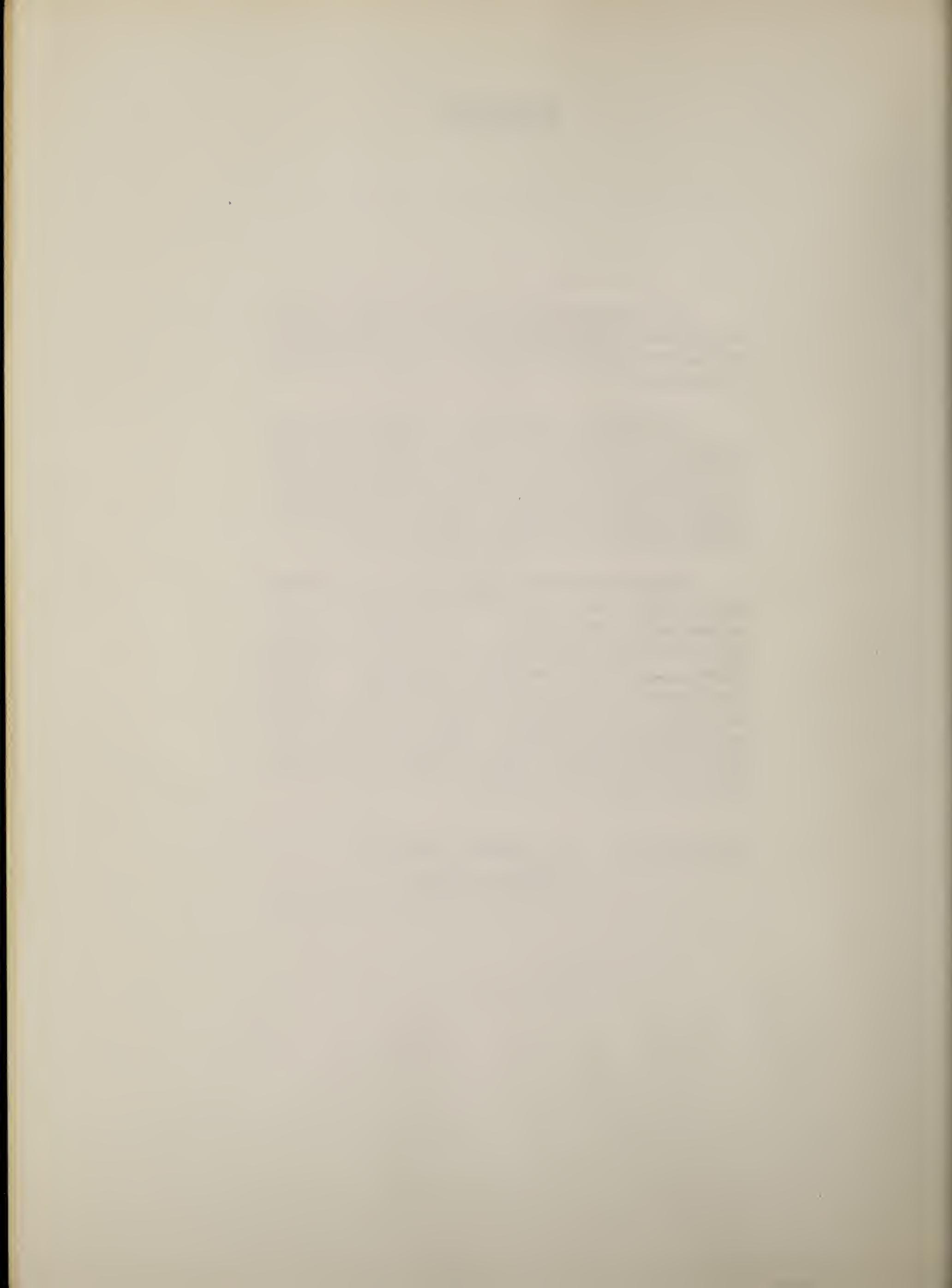
It is a pleasure for me to welcome this valuable contribution to the inadequate number of publications in the field of professional literature dealing with services to blind people.

All thoughtful workers for the blind recognize the need for the blind child to enjoy experiences in growing like those available to the sighted child. The experiment outlined in this report of providing an integrated camping facility for children who are blind is an excellent example of carrying out this principle.

The experiment was a joint effort of a specialized agency, The Jewish Guild for the Blind, and a community center, Bronx House. It is hoped that this report will inspire more instances of such cooperation between specialized and generic agencies. We also hope that this example may be instrumental in opening more doors of community group centers to blind children throughout the country. The gains will be manifold -- to the children, blind or sighted, as well as to the agencies and to their staffs.

June 15, 1961

M. ROBERT BARNETT
Executive Director
American Foundation for the Blind



PREFACE

Although many of the attitudes yet dominating our society are contrary to the welfare and happiness both of the individual and society, significant changes have taken place in the public's attitude toward blind and visually handicapped persons. Genuine concern has stimulated great advances in facilities, research and medical treatment for blind people. The widening concept is emerging that advances in medical knowledge must be complemented by sober consideration for the social competency and social adaptability of the blind person. A major objective focuses upon the need and desirability of assisting blind persons to take their places in the social organization of community life, enjoying its opportunities, privileges and responsibilities.

Traditionally, the concern for the total well-being of the visually handicapped group has been, and in large measure still is, confined to the efforts of the specialized social agency for blind people. However, recognition of the social-emotional aspects of blindness has highlighted the need for collaborative effort with other social agencies, particularly the group work agency. This need is underscored by the realization that comprehensive service necessitates planning for a treatment environment conducive to healthy growth and development. The cooperative efforts of the specialized and the group work agencies emphasize their common goals and objectives. Each makes available its unique value and competency to the service of the other, thereby integrating the development of a constructive program for the individual.

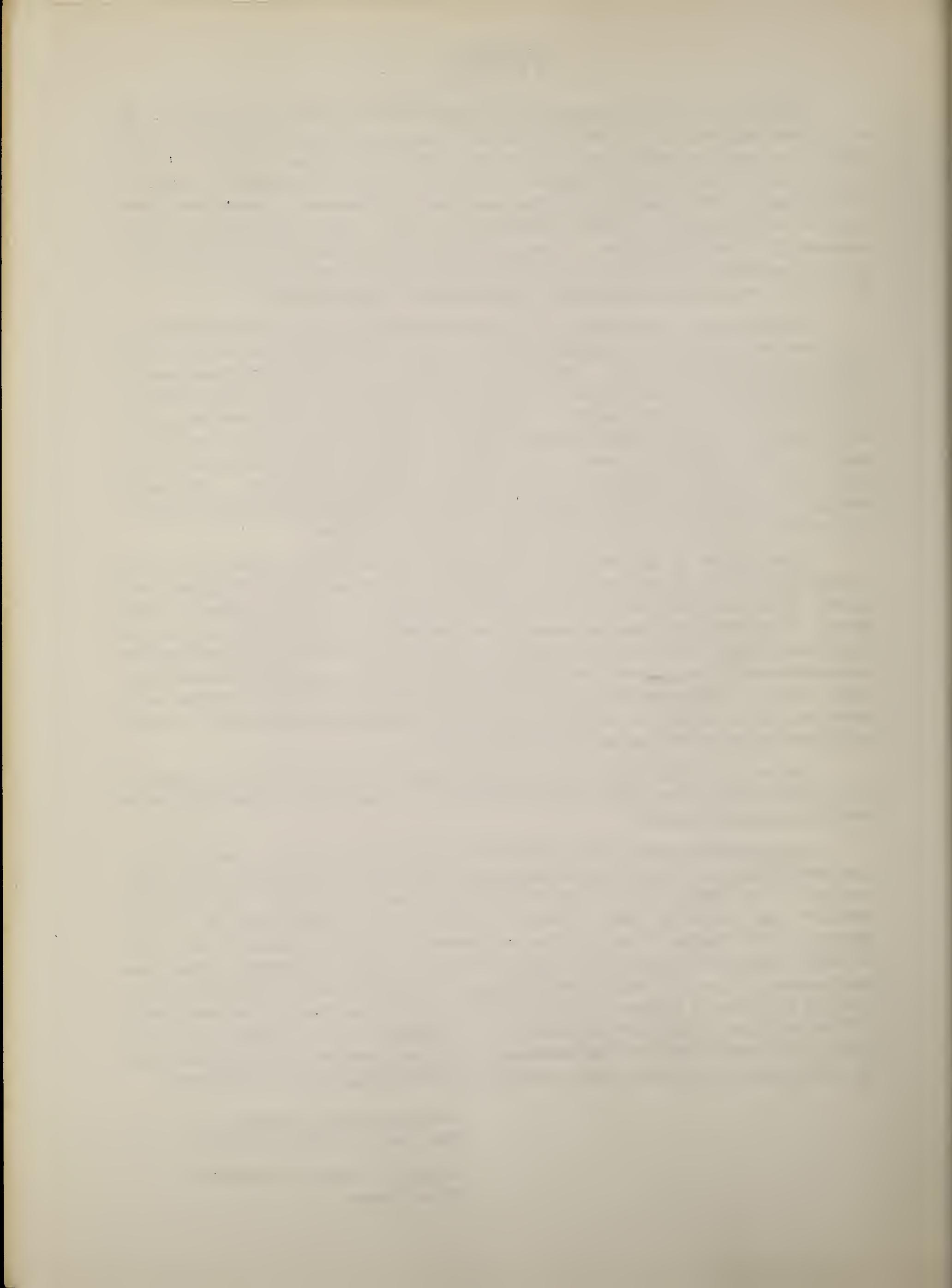
The purpose of this report is to describe the cooperative endeavors of The Jewish Guild for the Blind (the specialized agency) and Bronx House (the group work agency) in serving blind children in a summer day camp program conducted by Bronx House. It purports to examine some of the integration of blind children in a normal group work setting. This account is based on day-to-day experiences, the philosophical considerations for the program, and the essential process of cooperation between agencies. Within a framework that has been carefully planned and tested, the report suggests the rich potential for service, and offers a challenge and opportunity to extend and expand group work programs for the blind person.

We wish to acknowledge with warm thanks the role of the Boards of Directors of The Jewish Guild for the Blind and of Bronx House, whose vision and encouragement made this program possible.

A collaborative effort calls upon the services of many persons, and to the original staff planners, a special debt of gratitude is expressed for their help in this common task: The Jewish Guild for the Blind - Mrs. Sidney E. Pollack, Administrative Director; Mr. Sidney R. Saul, Director, Group Work and Recreation; Mr. Robert Shapiro, Group Worker; Mrs. Ada Kozier, Casework Supervisor; Bronx House - Mr. Sol Rafel, Executive Director; Mr. Robert Glass, Day Camp Coordinator; Miss Rose Stockhammer, Director, Pearl River Day Camp. Special thanks is extended to Mrs. Cathleen F. Lawlor of the New York State Commission for the Blind for her description of "Eye Conditions in Children" (Appendix). Our great appreciation is due to Mrs. Shura Saul of The Jewish Guild for the Blind who gave of her creative talents in assembling the raw material and records, and in editing and formulating them for publication.

John Rosenthal, President
The Jewish Guild for the Blind

Roland B. Stearns, President
Bronx House



CONTENTS

	Page
Foreword	ii
Preface	iii
HOW IT ALL BEGAN	1
The Need.	2
Two Agencies Share A Viewpoint.	3
The Specialized Agency	4
The Community Agency	4
Exploring Possibilities and Developing Perspectives	5
STRUCTURING SUCCESS	11
Intake - How The Children Were Chosen.	12
Grouping - How The Children Were Grouped	18
The Staff.	21
Pre-Season Planning.	24
SPEEDING INTEGRATION	29
Through Program	29
Activities	30
Physical Safety and Orientation.	38
Learning New Skills	40
Through Relationship	44
The Leader	45
Talking Things Over	50
From Pity to Respect	55
Through Supervision	61
Through The Parents	68
EVALUATION AND SUMMARY	75
APPENDIX	81
The Children	81
The Camp Grounds	81
Eye Conditions In Children	82
Recommended Procedures In Contacts With Blind People	87
Summary For Referral	88
Recording	90
Supervision Records	91
Guide For Final Group Summary.	92



HOW IT ALL BEGAN

THE NEED

TWO AGENCIES SHARE A VIEWPOINT

The Specialized Agency

The Community Agency

EXPLORING POSSIBILITIES AND DEVELOPING PERSPECTIVES

What was the purpose of the program?

Who are the cooperating agencies and what interests did they combine to develop the program? How did the two agencies divide responsibilities? What working relationships were established?

What values did they hope to explore for the sighted child, his family, his community: for the blind child his family, his community?

What problems did the agencies anticipate?

What implications for broadened community center service were envisioned?

THE NEED

Summertime, for most children, is a time for fun, for play, for social and physical growth. It should be so for all children! For some families, however, this season presents special problems; among these are the families of handicapped children, including the visually handicapped. Summer is the time of greatest leisure for all children, yet it is also when school and other special agencies are often likely to suspend or curtail program.

The special need for serving blind children during the summer was presented to us by their harried parents. One after another, they described their children's summer problems of loneliness - and their own harassed attempts to keep the children cool, comfortable, and happy. At best, this is a formidable task in a hot city: to which are added the lack of community friendships for the blind child; problems of safety and transportation in a large city; a general paucity of community facilities; and, last but not least, the needs of other siblings in the family.

Many blind children lead lonely social lives all year round. Case records, gathered at the Guild, present a composite picture of this:

. . . Jerry has been blind from birth. When he was 3 years old, his parents tried a dozen nursery schools but none would accept him. He was sent to a nursery for blind children far from his home. Now, at the age of 6, he is picked up by a Board of Education bus and taken to a public school in his borough that has a braille class. There, he spends certain hours of the day in braille class and other hours in a regular class of his grade. He is removed from his immediate community.

. . . Billy also attended a nursery school for blind children. When he "graduated" his parents sent him to a residential school for blind children. He lives there from Sunday evening to Friday afternoon, spending the week end at home with his parents and sighted sisters.

. . . Marvin's mother told us that he is "friends with everyone in the neighborhood", but when our social caseworker looked into the situation she found that he had only a "hello" acquaintance with them. They would come and play with his toys for a while, but would soon leave him to play in games that he had not learned how to play. Marvin didn't have a real friend or playmate.

. . . Kathy's parents sought admission for her to a neighborhood community center, but she was not accepted. Therefore, on Saturdays, she'd attend the recreation center for visually handicapped children where together with Billy, Jerry, Marvin and other blind children, she enjoyed entertainment, games and refreshments.

Separate classes, separate schools, separate recreation centers; how isolated, how segregated, how narrow - and ultimately how lonely may be the lives of such children! They have not had the opportunity to develop as part of a wholesome complete social group; rather, they have been relegated to the fringes of the life stream.

Clearly indicated, then, was the need for a summer program for blind children which would enable them to enjoy their summers as all children should; would break into their isolation and draw them closer to their social peers in the community; and would help guide their social and emotional development in a healthy normal way.

Some agencies had already provided successful summer programs for groups of handicapped children. Thus, when the needs of blind children were perceived, it was believed that such agencies would be interested in exploring the possibilities for serving them.

In keeping with its viewpoint that new programs, wherever possible, should be developed within the community setting; the Guild sought to fill this need for blind children through an already functioning summer day camp program.

TWO AGENCIES SHARE A VIEWPOINT

The development of such a program required some basic points of agreement between the two agencies to be involved; that is, the specialized agency serving blind children (Guild) and the community agency which might undertake to cooperate in the summer program (Bronx House).

1... That it is both possible and desirable to integrate some visually handicapped with normal, sighted children (see section on Intake).

A blind child, like a sighted child, needs group experiences in which he faces real life situations and begins, with help, to adjust to and solve some of his problems. He needs opportunities for normal play activities and varied relationships with his peers.

There are several ways in which such experiences may be provided to a visually handicapped child. Here, the goal was a completely integrated experience in which the child would be placed with a group of his sighted peers to participate (like every other group member, to the best of his ability) in all aspects of group life.

2... That there be a broad and flexible interpretation of community service, which seeks new horizons and permits experimentation. This implies a dynamic concept with the perspective, possibly, of integrating the blind child into the community beyond the program itself. It further implies a growing assumption by the community of its responsibility toward the handicapped child.

This concept involves the attitudes of both agencies:

- (a) The willingness of the community agency to accept more and more responsibility.

- (b) The willingness of the specialized agency to assist in the development of independence of the handicapped child and his family by:
- (1) Helping, in whatever way is indicated, to lay the groundwork for such independence and,
 - (2) Being willing to withdraw when possible; yet to remain available for service when and where necessary.

3... That the family be involved in all facets of a child's development; that both agencies establish healthy relationships with the family unit and be prepared to give help when the need arises.

4... A joint acceptance of social group work as a method of implementing integration and the high standards of individualized service which this implies.

Agreement on these points would mean that the project could begin with a shared viewpoint providing optimum circumstances for successful experimentation.

The Specialized Agency

The Jewish Guild for the Blind is a nonsectarian, multifunctional agency serving visually handicapped people of all ages. It provides casework, vocational rehabilitation services, sheltered workshops, group work and recreation programs in both its City Center and its Home for the Aged Blind in Yonkers, N. Y. The Guild's orientation is toward ultimate integration of blind people into their sighted communities wherever feasible. In its service, the Guild seeks to "assist families and individuals in developing both the capacity and the opportunity to lead personally satisfying and socially useful lives."

The services of the Guild are geared to the dignity and the rights of a blind person to function as a member of a democratic society; with recognition of his social responsibilities and his special needs. Through the individual nature of its service and its emphasis on social rehabilitation, the Guild aims at eradicating, both in actuality and in the public mind, the stereotype of the socially dependent blind person.

The efforts of every department within the Guild are directed toward this goal. The consultative services of the social casework department are offered within the framework of this philosophy. The group work department implements this philosophy through its program of activity. It aims to help people become part of a community in which they live, using its facilities and group work services in addition to and ultimately instead of the Guild where possible.

The Community Agency

Bronx House, a Jewish Community Center supported by Federation of Jewish Philanthropies, is a social service agency created to help its membership obtain a greater measure of psychological freedom, social cooperativeness and communal awareness. Bronx House aims to foster healthy development of children, youth and adults through group participation and creative experiences.

The social group work method is emphasized through the media of the group and the family. Recognizing the family as a potent force in the individual's educational, psychological and vocational development, the Agency has successfully encouraged the family membership registration (mandatory for all children under junior high school age, voluntary for other age groups.)

Traditionally, Bronx House has geared its service to the total community. It has viewed its program and activities as ever experimental, ever alert to newly emerging needs of the community; and has extended its group work services beyond the customary areas of community center services to reach heretofore unserved groups, notably the handicapped. At various times, it has developed programs for the deaf and hard-of-hearing, orthopedically handicapped and mentally retarded children. Through these experiences and observations, Bronx House adopted the concept that handicapped children may be served in a normal community setting.

Here then were two agencies in philosophic agreement, each able to complement the other to serve blind children in a new way. Both agencies agreed that the best interests of both blind and sighted children, as well as of the community, could be served through the development of an integrated summer day camp program.

EXPLORING POSSIBILITIES AND DEVELOPING PERSPECTIVES

In the winter of 1957, the social case work and group work staffs of both agencies began to meet and plan for the coming summer. Staff meetings were held in both agencies to further a mutual understanding of the functioning of each. A good working relationship was established and specific responsibilities were divided. Basically, the Guild was to handle:

1. Recruiting, initial intake, screening and referral of children.
2. Preparation of evaluative and diagnostic material.
3. Provision of some leaders in program (initial stage only. See section on Staff Organization).
4. Assistance in leadership training and/or orientation as required (see section on Orientation).
5. Provision of consultative services on a regular basis during the season; and cooperation in follow-up as indicated.

The referral having been effected, Bronx House staff would interview parent and child as they would any applicant for day camp, and upon acceptance, serve this family as they would any other member family. (See Intake)

Where a difference of opinion about practice might arise, it was agreed that the community agency which handled the children directly would have the responsibility of making the final decision. While the specialized agency would function in a cooperating and consulting capacity, no foregone conclusion could or should be imposed upon the community agency. A mutual respect for one another's competence would be an integral factor in effecting a successful relationship.

At these joint meetings, staff raised questions to precipitate discussion and hammer out a joint viewpoint for the project. Questions revolved around the "why and how" of an integrated program.

Why?

What are the anticipated values of the integrated program?

What would the blind children gain? What would the sighted children gain? What values, if any, would accrue to the total program?

For All Children

A child who grows in a democratic culture needs the opportunity to develop wholesome social relationships with his peers. Any child goes to camp to enjoy good healthy summer activities. He should have a wholesome group experience in co-operative living, planning and sharing his fun with other children. He should acquire new skills such as swimming, camping and athletics; and participate in varied programming, such as music, dancing, crafts and dramatics. The city child gains new knowledge and some experience in country living.

For The Blind Child

In addition to these general values, there are important social gains for the blind child in the community setting. In the first place, he would begin to see himself as a member of his own broad and busy community, participating in normal varied activities, and accepted by his social peers. The blind child, heretofore deprived of such experiences, would enjoy a new and twice-valued freedom: first, he would enjoy the acceptance itself, and second, it could provide new opportunities for continued contacts with his peers.

Exposed to the challenges of normal group living, the blind child may recognize new abilities within himself. In his desire to become part of the activity in the social structure of the broader environment he has entered, he might be willing to undertake new areas of endeavor. He would also be required to accept new responsibilities and he must be willing to practice new social skills if he is to be a truly accepted member of his peer group. A group experience with sighted children would deepen the blind child's comprehension of the world about him and his relationship to it.

For His Family

Hopefully, the family of the blind child would gain new insight. They would be encouraged by any progress he might make - in learning new skills, in adjusting to his group, or in making new friends. The blind child could attain an increased stature in his family through his successful normal social experiences. Also, the child's mastery of new social skills might improve family relationships and ease tension. Parental

anxiety concerning the possibilities of his development might be considerably relieved by his new growth. Hopefully too, the family would begin to see possibilities for further integration on other levels and other times during the year, and be encouraged to pursue them.

For The Sighted Child

Segregation has a double impact - for it has robbed the sighted child of a dimension of experience which is part of his real world. Many sighted children who have had no experience with blind or otherwise handicapped children may tend to be afraid - of them or of their handicap - thus finding it difficult or impossible to relate to them. A guided wholesome experience can free them of this fear and replace it with understanding and respect for the individual and his abilities. Such an experience can help develop a sense of social responsibility toward others.

Staff expected that the blind children would be accepted by the sighted children, although it was anticipated that the latter would require interpretation and help in understanding some of the limitations and problems of the handicapped children. We expected that the learning and growth of the sighted child would be developed as follows:

- ... To accept others as they are.
- ... To help others in the way one can and to receive help in the ways one may require.
- ... To get along with others who are "different."
- ... To respect the limitations of others as well as their abilities.
- ... To share the happiness of one's own complete existence and to learn that this sharing makes such an existence even more complete.

For The Community

Providing a valid and wholesome service through the successful integration of handicapped children into existing facilities would benefit the entire community. Such a program implies the development of better citizens able to function more effectively as members of their own community. Families which are no longer required to leave the community to meet the needs of their handicapped child also become more actively involved in community life.

Thus, the community is drawn closer; there is more active citizen participation; perspectives for fewer problems in this area; better citizen development; all of which contribute to improved mental health. Such extension of facilities adds up to better and more efficient use of the welfare dollar.

For The Community Center

Similarly, the community center, in providing more efficient and complete service, adds a dimension to its concept of community service and provides community leadership in a new and necessary area. Such acceptance of new responsibilities implies greater interest in community problems and possibilities for their solution. This enlarges the scope of the center's service and broadens its base of operation in the community.

All these envisioned benefits are consistent with the humanitarian - democratic philosophy of service to which a community center is dedicated.

How?

Thus, it was anticipated that the potential values warranted the effort. However, a new host of questions arose.

- ... What potential problems would be presented by the presence of the blind children in camp?
- ... Could the blind children endure the physical stresses of summer day camping? Could they maneuver rough country terrain? How would the possible fatigue affect their attendance?
- ... Could they participate in activity? With what degree of independence? Which activities would not lend themselves to participation by blind children?
- ... Could they learn new skills? If so, how?
- ... Would the possible limitations of the blind children impose unacceptable limitations on the other children?
- ... To what extent might these problems blunt the pleasures of day camp for everyone and possibly defeat the values of the integrated program?
- ... How could the solution of these problems be implemented so that the full value of the experience might be realized by all?

In this first year of so many questions, staff planned to proceed slowly from a segregated to an integrated program: studying possibilities for integration as they arose and seizing the opportunities as they presented themselves. In anticipating these possible difficulties, staff stressed the need for program flexibility. Staff expected to be able to handle situations as they occurred - with interest, courage and ingenuity - rather than to anticipate too many problems.

(At this point it is interesting to note that over the four-year period, 92 blind children were served, averaging 23 per summer. Records indicate that their attendance was as good as, and in many cases, better than the average attendance of the sighted children.)

For Whom?

Realizing that blind children are not all the same, but like sighted children, are individual and different - we also asked:

- ... What kind of blind child could be successfully integrated?
- ... What, if any, were the limitations -

- (a) as to the child who could be successfully integrated and,
- (b) as to the activities in which the child could participate?

We knew in advance that some children might not benefit as much as others and that some children, even though carefully selected, would not do well in the program. Basically, however, children who would be accepted into the program would be regarded by camp staff as regular participants whose special problems, as they arose, would have to be handled - just as would be the problems of any other child in day camp. A blind child who could not do some of the things that others did, might become frustrated. These frustrations would have to be handled as they arose, using all the resources at our command as they seemed needed (camp staff, leader, supervisor, Guild consultant).

We also planned for:

1. Careful intake procedures.
2. Pre-season planning and orientation.
3. Detailed process records, including anecdotal material on each child.
4. Periodic conferences on staff and consultative levels with consistent follow-through and re-evaluation of procedures as necessity indicated.
5. Program flexibility to meet individual needs - necessary in over-all camp planning - would be required also to accommodate to the presence of visually handicapped children.
6. Continued interpretation to parents and community through:
 - (a) Parent conferences and meetings to explain our viewpoint and
 - (b) Individual contact with parents of both sighted and blind children to discuss problems as they arose.
7. Ongoing discussions with the children themselves concerning the presence of visually handicapped children in the camp and problems as they might arise. Through these discussions, staff hoped to establish a common denominator for acceptance by all the children of each other.

How "Special" Should The Program Be?

What special facilities, if any would be required?

What special training, if any would staff require?

What unusual expenses would accrue to the program?

Here again reference was directed towards the strengths and abilities of the blind children with the perspective of integrating them into community life. It was agreed that the blind children should be accepted into the setting under the most normal circumstances possible. Just as the problems of every child at camp are met as the need arises, so too would staff direct its efforts towards meeting needs of blind children - modifying, adjusting, adapting, or developing new ways as the need was indicated.

Basically, both agencies wanted to test whether it was possible for a blind child to participate in a wholesome, creative summer day camp program with no special facilities, unusual preparation, or additional cost. Both agencies hoped to show that a professionally orientated, well organized, and individually geared program, could meet the needs of the blind child; and that, in so doing, the total summer experience of all the campers would be enhanced.

GUIDEPOSTS

1. Survey needs of blind children in the community.
2. Pool community resources and develop joint philosophy.
3. Establish a professionally sound working relationship between agencies.
4. Plan for flexibility, continued interpretation, and an open door for exchange of viewpoint.
5. Select and distribute pertinent educational information. Use help of federal, state, and local agencies where available.

STRUCTURING SUCCESS

INTAKE - HOW THE CHILDREN WERE CHOSEN

What was the reason for an additional step in the intake process for the blind child?

What was the role of the specialized agency?

What is to be sought in the initial interview? What does the agency wish to know? What does the family wish to know?

Which blind child seems to have the greatest potential for successful use of this experience?

GROUPING - HOW THE GROUPS ARE STRUCTURED

What are the criteria for placing any child, blind or sighted, into a group? Are these different for the blind camper?

How many blind children is it wise to place within a group?

Does consideration for the blind individual result in any "extra strain" on the total grouping process?

THE STAFF

What are the basic responsibilities and goals of a leader in camp?

Are the criteria for choosing leaders any different in this program?

Does this program require specially trained leaders?

PRE-SEASON PLANNING

What is the general orientation of staff for the summer program? How is staff oriented to understand some specific needs of the blind children?

What specific help can be extended to staff in preparation for the presence of a blind child in camp?

How is the intake material used?

What is the role of the specialized agency in pre-season orientation?

INTAKE - HOW THE CHILDREN WERE CHOSEN

The need for a sound professional intake procedure was immediately perceived by both agencies as a basic ingredient for the success of the program. Its purposes would be -

1. To determine whether the applicant can be served in this program by:
 - (a) providing an objective evaluation of the child
 - (b) helping determine whether this program would best meet his need and
 - (c) evaluating his potentialities for successful participation.
2. Such an objective evaluation would also gather a body of material, to help determine in which program or group the child may be placed most successfully.
3. To gather material to help staff in its planning to serve the individual child in all facets of program. This material would be valuable on all levels of staff planning (orientation, activities, supervision, etc.).
4. To lay the groundwork for continued specialized services to the family where necessary.

Criteria For Acceptance

The basic criterion in considering children for the day camp program was to include those with a maximum potential for group integration. Therefore, we attempted to select children with no other major handicap, feeling that this way would provide the best opportunity for judging the potential of the blind child for integrated experience.

(This intake policy was especially pertinent to R. L. F. children, some of whom showed secondary handicaps such as retardation and/or emotional disturbances.) It may be noted here that the validity of this basic approach was reinforced by 2 negative experiences. These involved 2 blind girls; one, severely retarded; the other, emotionally disturbed. The day camp staff found that these handicaps, rather than the blindness itself, proved the major obstacle in their integration to the program.

We were also limited to the geographical area covered by the Bronx House day camp transportation service. This limitation, however, coincided with the viewpoint that the children might be able to make future use of this neighborhood community center and continue their relationship with children living in their own neighborhood. However, because of the need for this service and the lack of such a program elsewhere in the city, transportation was provided for some children from upper Manhattan. Eligibility was limited to children from 7 to 12 years old (who would attend the day camp at the Mildred Goetz site in Pearl River) and 4-1/2 to 7 year olds (eligible for the Children's Center in the city.)

Some of the children applied through the Guild's own program (nursery school, counseling load) and others were referred by other agencies for the blind, (nursery, residential and denominational schools). Some parents applied directly having heard of the program through other parents of blind children or through a parents' association.

Early in intake, the Guild became aware of a unique family situation which could not be ignored. A problem sometimes arose in connection with the sighted sibling in the family. Sometimes, special agencies had provided services to a blind child which the community at large had not provided for his sighted sibling. This, coupled with the blind sibling's extra demands on parental attention, often resulted in resentment and problems within the sighted child.

i.e., Mrs. B. had male twins, Bert and Bill, age 7. Bill, the blind child, had been able to go to nursery and special recreation programs, and was now being considered for day camp. His sighted twin, Bert, had enjoyed no parallel opportunities. In keeping with the Guild's emphasis on service to the entire family, assistance was extended to the sighted child in recognition of the total family picture. This became agency policy.

Interviews

Parent and child applying for admission were seen in 3 interviews with 3 different people.

The first 2 interviews were at the Guild; both scheduled for the same day for the parent's convenience. The first of these was held with a case worker, the second with a group worker. Both interviews were conducted with the purpose of obtaining general information about the child and family setting, a clear picture of the eye condition, and of evaluating the child's potential ability to succeed in the program.

At both these interviews attention was focused on the following:

1. Eye information

Medical history of child's handicap including diagnosis, age at which child lost vision, extent of useful vision, and any medical recommendations regarding limitation of activity.

Specific information was secured from parents, medical report, and through observation of the child. This was particularly important for a child having partial vision as knowledge of eye condition may be extremely pertinent (i.e. Joey must be protected from bumping his head because he lost his vision due to excision of brain tumor.)

If the child has partial vision, can he or she see large objects only? At what distance? Can he recognize faces, colors? Is vision central only or can child see in all directions? Does child use available vision fully at all times? In some instances, particularly in cases of nystagmus (see Appendix), the child's use of vision varies with degree of concentration and, therefore, is affected by his general emotional adjustment as well as his comfort in a specific situation.

2. Emotional adjustment of parent and child to the handicap

This is an important focal point. Workers try to determine whether the parents feel that their child can be trusted to take care of himself.

Can he be expected to find a toy in the chest or his coat in the closet? Do his parents feel that blindness sets him apart to the extent that they believe sighted children will not want to play with him, or would make fun of him? How does the child feel about himself? Does he try to do things other children enjoy - pegs, pull toys, blocks, swings, slides, or does he cling to the adults for direction and attention at all times?

3. What is the child's spatial orientation?

Will he find his direction quickly in a new situation or will he feel lost and fearful? How does he get to know a new setting - by exploring with his hands, listening to sounds (water splashing, steps, voices of others). Does he use his sense of smell?

4. How does the child adjust in areas of self-help?

Has he learned to use eating utensils? Does he dress himself without assistance, including buttoning his coat and zipping his pants? Can he toilet himself independently?

Answers to these questions give a composite picture of the parent's attitude to the child's handicap and of the child's ability and manner of handling himself within its limitations. Sometimes parents have observed how the child feels about being blind. (Joey never talks about it. Harry, who has light perception, has a compulsive interest in electric lights. Edith says, "I can see too." Mary, partial vision, wants to do everything sighted children do, but sometimes hurts herself and others by poorly controlled movements.)

5. Interests and attitudes

Full exploration of the child's social experience and capacity was needed to help Bronx house determine his object relationships, play activities, freedom of movement in space, and capacity to use equipment. Some of the questions that were explored here were:

How does he spend his time after school? What are his favorite games? Does he participate in physical activity? Does he play alone in the street? Does he cross the street alone - if so, how? Does he ride a bike or play ball?

What are his relationships with other children on the block? Does he play with sighted children? If so, when and how? How does he get along in school - both in his studies and socially?

What are his favorite subjects in school, his hobbies, his interests? Does he use the TV set or the radio. What program does he like?

6. The parent's attitude was also observed during this interview.

Was the child permitted to answer for himself? How does the child relate to the worker? How did he get around in the worker's office? What kind of questions did the child ask. (Will I be able to swim in camp? How long is the bus ride?)

7. Relationships to adults and children

This area which involved important problems of personal adjustment was explored in the interview as it would have been with a sighted child. However, a blind child is likely to have been isolated and may not have participated as freely in activity with neighborhood children. In addition to these realistic factors, parents may have increased this isolation by over-protectiveness and fear of rejection by sighted children. Since the integrated program aims at arresting this isolation, it is important to understand the child's capacity for relatedness and for adjustments to new situations as well

as his readiness to be a member of a group. It is therefore important for the intake worker to evaluate whether a child's past patterns of behavior encourage the expectation that he will be able to adjust to an integrated group with the necessary support from the leader. Reports from elementary school or previous camp experience (segregated or not) can be very helpful in completing a picture of the child's potential adjustment.

8. Purpose of referral to integrated day camp

It is important to separate the parent's interest (which may have a number of facets), the child's expectations, and the worker's evaluation (based on the total diagnostic picture). For the parent of a blind child, the need to find organized summer activity is realistically pressing as children, particularly younger ones, cannot engage in outdoor activities without considerable supervision. A parent's desire to relieve herself of the constant pressure of the child during the summer months is therefore not necessarily evidence of rejection. On the other hand, this pressure may be such that the parent needs help in evaluating clearly whether the child is ready to use an integrated program.

As with any child for whom such a program is being considered, there may be a need to extend help in understanding the program and in anticipating the experience. His reaction will depend on his own security, adjustment and capacities. Fear of separation and of facing a new situation may require attention.

The Guild workers try to determine whether the child seems sufficiently mature to benefit from an integrated group experience and secure enough to relate to it without unduly disrupting the activities of the whole group.

9. Finances

As the Guild subsidizes the camp program for those parents unable to pay the full fee (vast majority), financial exploration became part of intake procedure. Whenever possible, parents were expected to meet the family membership fee for Bronx House, as both agencies agreed that it would be valid for these parents to belong to the Center just as did the parents of all campers. The remainder of the fee was based on the sliding scale of each family's ability to pay.

This by no means implies that most of the families served at the Guild are either financially insolvent or in the low income bracket. The Guild has learned that many families in the middle income brackets have depleted their financial resources in their attempts to locate and provide necessary medical, physical, emotional and social services for their children. Therefore, the Guild has extended financial assistance to such families whose income, under other circumstances, might have been deemed adequate for full fee payment in day camp.

The third and final interview was held at Bronx House. At this interview, Bronx House staff had the opportunity to become acquainted with the parent and child; the parent had the opportunity to learn more about the community center sponsoring the program. The interview followed the lines of the regular intake procedure for every camp applicant. Here, too, the focus is on the child's relationship with members of the family, peers and other adults. His attitude toward responsibility, school, interests, likes and

dislikes are also noted. Included in the interview is an interpretation of agency, day camp and the role of the family in relationship to the agency.

In this interview, Bronx House staff was able to form independent impressions of both child and family; to engage the family's interest in the program; and to begin to understand some of the familial problems and anxieties about the visually handicapped member of the family. Parents discuss some of their specific concerns - such as, the terrain, possibility of acceptance or rejection by the sighted children, etc.

The intake information, recorded on a standard form, is especially useful in helping staff gain a better understanding of the child and in establishing a warm relationship with the family. This initial intake interview served a dual purpose for it introduced Bronx House to the family, and also introduced the family and the child to the Bronx House staff.

After these 3 interviews had been completed, Guild and Bronx House workers together reviewed all of the applications and decided on admission. Both staffs had to balance soberly the parent's desire for this experience for his child, along with the judgment (especially of Bronx House staff) of each child's potential to manage and enjoy this experience.

GUIDEPOSTS

1. A careful intake process involving, wherever possible, the assistance of experienced social case workers and group workers.
2. The purposes of intake are seen to be:
 - a. To learn about the individual blind child and to gauge his potential to adjust to, enjoy and profit from the experience.
 - b. To provide information to help the day camp staff gain a better understanding and more complete picture of the individual child. Such information assists in determining the grouping; in pre-season orientation and planning; and in determining possible need of the child for some preparation in anticipating the experience.
 - c. To establish a warm and on-going relationship with the family.
3. The interviews consider specific medical and eye information; physical and emotional adjustment of the child; his interests, aptitudes and relationships with others; the family attitude.
4. It is important that this intake information be available well before the season for its most effective use in pre-season planning on supervisory and counselor levels.
5. It seems best to begin with children most likely to succeed. The visually-handicapped child who is ready and able to use the experience integrated most quickly and presented the least number of problems to himself or the rest of the camp.
6. Therefore, in the beginning at least, it is not advisable to accept multiply-handicapped children. As the program progresses and staff becomes more comfortable, it may be possible to include some such children on a highly individual basis. (The agencies engaged in the integration program were simultaneously alerted to the needs of the emotionally disturbed blind children; and after the fourth year of the program, new plans were developed to serve these children in special programs during the summer time.)
7. The intake procedure is one of the areas in which the community agency has required the assistance of the specialized agency; and it becomes the one important point in the process which may involve an additional expense. However, when it is considered that the extension of existing facilities obviates the need for an expensive segregated camping program, the cost of the intake process may be viewed as a small investment toward a much larger saving for the total community.

GROUPING - HOW THE CHILDREN WERE GROUPED

Before grouping the children, something must be known about each of them. Based on the information obtained through intake, staff begins to formulate pictures of individual campers and group possibilities. The intake reports describe the individual child's personality: his interests, skills, school adjustment, peer relationships, etc. A summary of contact (requested from any referring agency) is also helpful. The groups are then structured to provide maximum opportunity for individual physical, emotional and social development in the program.

There are about 20 children in a group, with one counselor, one assistant, and two counselors in training. In grouping, care is given that no one group be dominated by withdrawn, hyperactive, or otherwise atypical individuals. Bronx House experience has shown that 2 atypical children can be absorbed in a group of 20 without affecting the happy functioning of the group or overwhelming the staff. (Blindness per se, was not regarded as such a determining characteristic.)

Several concerns govern the placing of a child within a group. Although the groups are based on chronological age, this factor is considered directly along with the emotional, social and physical maturity of each child. (A child who is physically small for his age may feel more at ease in a younger group; or a shy, withdrawn, dependent 8-year-old may be able to function more adequately with the group of 7-year-olds.) The child's grade in school may also be important. By and large, no rigid age limit can be established. The child's potential contribution to a group, and the group's contribution to the child's well being, are basic considerations rather than limitations.

Also considered, are the natural friendship patterns of the children. Children's preferences to be together are recognized. However, thought is given to the relationship in terms of its value and meaning to the individual. (For example, a parent's request that siblings be placed in the same group is evaluated in the light of the needs of each sibling. Parents are helped to understand the possible need of one sibling to have a different experience from the other.)

The same determinations for grouping apply to the blind children in camp. In this process, it is impossible to overestimate the value of the intake material. This material enabled staff to see the blind child as an individual and to gauge his potentialities for group adjustments on the basis of his personality. In this determination, blindness is a consideration, but neither the sole nor necessarily the most important one.

In the first year, because this was a learning experience for 2 agencies exploring methods, a segregated group was organized for the blind children for an undetermined, brief period of time. Staff had thought that the blind children might need this time to become accustomed to the environment, and might evidence some special problems in physical orientation. Within the first week, the staff perceived that there had been no necessity for such a group.

In the second week, this group merged with the 8-year-old group of the camp itself in a moving ceremony - in which the blind children presented the sighted children

with a tree to be planted in the joint camp site, while both groups sang songs to each other. Such a segregated group was never again organized. Staff members realized that it was really they and not the children who had required this first week of segregation - which, in a sense, had assured the leaders that they would be able to handle the blind and sighted children together. The staff had been able to move this quickly because of its sincere acceptance of the program; a sincerity which was basic to the success of the program itself.

It must be noted that even during this first week, there was a great deal of informal contact between blind and sighted children. Eating lunch together, swimming, travelling on the bus to and from camp, provided opportunities for leaders and children to get to know each other. (See further discussion in section on Program.)

The structure provided enough leadership to both visually handicapped and sighted children so that larger groups could be divided into sub-groups to fulfill individual interests. In this way, blind children (who might not be able to participate in some activities) would never become an obstacle to the sighted children. Under this plan, also, some of the sighted children who might not enjoy one activity would be able to participate in an alternate one. Thus the group structure and the staff organization laid the basis for flexibility in programming.

(These concepts for grouping developed along with other phases of the project. In the first year, the group of blind children merged with their chronological peers of sighted children with little or no consideration of individual differences. In the second year, there was greater individualization. Based on special need, 2 of the blind children were placed in groups other than the one in which the majority of the blind children were placed. In this second year, also, several younger blind children were accepted and placed in the Children's Center of the Bronx House summer day camp. These children were placed directly within groups of sighted children: their placement determined by the same factors which were considered in placing any child into a group. By the third year, considerations for placing the blind children were the same as those for any child applying for day camp.)

GUIDEPOSTS

1. Grouping is a highly individual process in which the intake material is of inestimable value. Twin considerations are involved:
 - a. The needs of the individual child, and,
 - b. The needs of the other children (group) with whom he is to be placed.
2. General criteria in grouping involve:
 - a. Chronological age, physical, emotional, and social maturity of child.
 - b. How he may be expected to relate to the others in the contemplated group; how they may be expected to accept him.
 - c. Natural friendship patterns; especially those which might speed or impede the adjustment and development of the child.
3. The criteria for placing the blind child in a group are basically the same; namely, the individual's physical, social and emotional ability to adjust to the group.
 - a. In addition, there may need to be considered the blind child's previous experience with sighted children; the extent of blindness. (This last is not, *per se*, a determining factor. A well adjusted blind youngster will do better in a group than a poorly adjusted partially-sighted child; thus, emphasis is again on the individual rather than the handicap.)
 - b. In considering the social potential of the blind child, it may be noted that where a child has lacked group experience, his psycho-social development may be different from that of his sighted peer. Therefore, an inexperienced blind 11-year-old may handle himself more acceptably with the group of 10-year-olds. Again, such decisions are affected by consideration of abilities, experience, and development of the total personality; as well as the character of the group with which the child is placed. (Similar consideration is extended to some sighted children.)
4. In the beginning, it seemed that one visually handicapped child in a group of 10 would be the most feasible proportion. As the experience level of the staff and camp developed, it became clear that it was beneficial and desirable to both the blind and sighted children to assign more than one blind child per group (the individual personality of the blind child is important to consider here). It is therefore recommended that, if possible, more than one blind child be assigned to a group.

THE STAFF

The average camp counselor who can work effectively with sighted children can work equally well with an integrated group. This concept is correlative to the philosophy of an integrated program.

Creative group leadership is a basic and vital component of creative group activity. Primarily, of course, a good group leader in camp sees to it that the children enjoy their group experiences and derive satisfactions from them. However, in a good group work program, such participation yields not only enjoyment, but also social learning and personality development for each child.

Inherent in the philosophy of integration is the premise that a blind child is primarily a child - with needs and desires similar to those of other children, but that these lie within the framework of the limitations of a handicap with which he must live and function. The physical limitations (and the consequent limitation imposed by them upon his experiences) give rise to a set of problems which may be different from another child's. Like the problems of any child - those of the blind child demand recognition and understanding in order to be handled. They require the patience, devotion, and initiative of the group leader coupled with the acceptance of the handicap and an ability to adjust with ingenuity to its specific demands. The group worker understands the abilities, capacities and limitations of each individual in the group, and thus for each blind child as well.

The intake material (which includes the observation of trained and experienced people) can be helpful if it is used - not to limit one's expectations of a child's ability - but to focus them realistically so that the child can best be helped to grow and develop.

Any good leader - with orientation, information and guidance - can lead an integrated group in a day camp program.

Organization

It was anticipated that staff organization would change as the program developed. These changes, from summer to summer, would reflect the increasing independence of the community agency and the logical steps being taken toward complete integration. (Guild supervisory staff was regularly and readily available on a consultative basis as needed.)

In the first year, 2 members of Guild staff (with some experience with blind people) were assigned to the Pearl River program as group leaders in addition to the camp's regular number of leaders. They functioned as an integral part of staff and were, like all other staff members, supervised by the camp program Director.

In the second year, only one such additional leader was assigned by the Guild to the Pearl River program. He functioned as a co-leader of an integrated group of blind and sighted children. In this second year, all but 2 of the blind children had been placed in this group. The co-leader worked with all the children in his group; and also acted as consultant to those counselors whose groups included the other 2 blind children.

In the third year, the process was furthered. The Guild leader became a Unit Head, supervising several group leaders and their groups which included some blind children. This leader assumed all the responsibilities of any Unit Head in camp and was supervised by the camp Director. In short, he had become an integral part of the camp staff, as had the blind children who were not fully integrated into total program. (He continued, however, to act as consultant where necessary, in matters relating to those blind children not in his unit.)

By the fourth year, Bronx House assumed complete leadership and no Guild staff was assigned in the program. Intake and consultative services of the Guild were continued.

In the Children's Center, the camp for younger children, a similar development occurred.

Thus, changes in staff organization, like other phases of the program, reflected the successful integration of the blind children into the total program.

GUIDEPOSTS

1. Criteria for selecting leaders are the same as in any good camp program.
2. The responsibility requires a counselor to have the capacity to work with individuals and with groups; evidencing understanding and concern for all children as well as an acceptance of their deviations.
3. Therefore, the leaders' ability to see and understand the blind child as an individual is most important.
4. Staff continuity (from season to season) is a valuable asset: It establishes a corps of experienced workers who can also help the newcomers on the staff.
5. An integrated program need not require any additional leadership. However, adequate leadership to insure the safety and pleasure of all the children is an important consideration – in this program as in any other. Therefore, any adequately, competently staffed camp can successfully include several visually-handicapped children within its population.

PRE-SEASON PLANNING

Pre-season training is part of the normal day camp structure and begins with the first interview of the potential counselor. From the very beginning, discussion of general camp program, goals, etc., referred also to the new project in integration, its philosophy and purpose, and its implications for each staff member. Reactions ranged from a startled, "I never even saw a blind child, how will I be able to have one in my group?" to a tentative, "How interesting such an experience can be!" Along with other considerations, it was necessary to explore these reactions which ran the gamut from fear, distrust and awe to interest and concern. The more sensitive and courageous counselors expressed interest in the program, recognizing its challenge and its potential as a learning experience. Their interest in and acceptance of the project were considered along with other qualifications when the final decisions were made in hiring.

Attendance at pre-camp training session is required of every staff member and included in the contract. Two of the four days of training are spent at the Agency and two more at the camp site. The purpose of these sessions is to develop good staff relationships, interpret Agency policy, and plan perspective for day camp program. Sessions focus on counselor role, use of natural environment in program, swimming safety, as well as consideration of the use of skills, games, music, dramatics, arts and crafts. The purposes and values of supervision, recording, and work with parents are discussed.

In addition, special consideration was given to the needs of the blind children in camp and the problems their presence might impose. These discussions centered on:

1. The philosophy of integration and the basic acceptance of each child in the program as an individual.
2. The anticipated values of this program to all the children, blind and sighted.
3. Anticipated problems in program and possible ways of meeting them: areas of concern included physical safety, teaching of skills, program participation, relationships amongst children.
4. Staff attitudes toward the handicapped child and individual leader feeling about serving this child in this setting.

In the first year, staff understood that answers to many questions that arose would be found during the experience itself and that no real "blue print" could be developed in advance. However these discussions did help to "set the stage" for the interesting summer that followed.

Workshops

Two specific workshops on blindness were held to prepare the counselors. Staff members shared their experiences, each contributing his special knowledge to the group.

1. First workshop

Staff was seated in a large circle. Each leader was asked to close his eyes, leave his seat, walk around the circle and return to his place.

The leaders noted and discussed their reactions. Everyone reported a fear of bumping, sensation of falling, general insecurity, and uncertainty of direction. The counselors then tried to translate these feelings to their possible manifestation in the behavior of a young child who is blind. It became evident that the blind child's behavior would have to be understood within the framework of these same feelings of fear and uncertainty.

With the help of Guild staff, the counselors learned some specifics about blindness and blind children such as:

- ... What is legal blindness?
- ... What are some of the causes of blindness in children?
- ... How did blindness affect the physical development of the child?
- ... How mobile can such a child be?
- ... What has the blind child learned, where has he studied, can he tell colors, can he find his clothing, how does he eat, can he dress and undress himself?
- ... Can he negotiate steps? How? Does he fall? What if he falls?

Some general information in answer to these questions was helpful. Pertinent written material was available. (See Appendix)

2. Second workshop

The second workshop was held at the camp grounds as staff was concerned with the problem of negotiating the rough terrain.

Everyone was blindfolded and asked to walk on the rough ground and then over the rocks. Leaders immediately became aware of the difficulty. Guild staff demonstrated some specific techniques in helping and guiding blind people, and also showed how to give verbal directions such as "take 2 steps to your right," or "walk straight ahead." (Refer - "Guide to the Sighted" - appendix). It became clear that awareness of the physical problems of the blind child was in itself a key to helping staff develop techniques to meet them. In the beginning, the blind child would need reassurance about his ability to negotiate the rough terrain as well as specific assistance in doing so. The counselor would have to find ways, other than visual, to help the child - such as pointing out the rough paths or the smooth grass under foot to know where you are. Many sighted children, too, might require reassurance and help over deep ditches or rocky paths.

3. Third workshop

In the Children's Center, where younger children were involved, another workshop was developed. Staff was organized into small workshop committees; arts and crafts, woodwork, music, science, blocks. Each counselor demonstrated the presentation of one of these activities to a group, keeping in mind that there might be either a blind child or a deaf child in the group. The entire staff then discussed the demonstration. The discussion revealed that consideration of the handicapped child in the group could provide an additional dimension to enhance the experience for all the children.

. . . For example, in our discussion of music, we considered how to include the deaf child. It was suggested that we place this child's hands on the piano or

the guitar to feel the musical vibrations and that a leader or another child sway in rhythm with the deaf child during the singing or music activity.

. . . We realized that the blind child would enjoy placing his hands on the instrument, too - and suddenly recognized that these techniques would be valid for all the children in the group and would enhance their enjoyment and understanding of the music.

In all the discussion, it was necessary to reiterate that each child must be considered as an individual. Some children perform on a better level than others. Counselors must gauge the ability of each child in the group and begin with that child on his own level. Some children might dress more quickly or eat more slowly than others. In each case, the counselor determines the area in which a child requires most attention. It was noted that this was equally true of the sighted children. Since many answers would be learned collectively as the summer progressed, staff would continue to share and interpret experiences.

Before the season began, counselors read the intake material for all the children to be placed in his group. Thus the leaders were able, to some extent, to anticipate the groups.

Pre-season orientation served:

1. To clarify the goals of the project.
2. To anticipate realistically and without fears some of the problems that might arise.
3. To provide some basic understanding of the blind child's special needs.
4. To help develop staff attitudes with which these needs might be met and handled.

GUIDEPOSTS

1. General orientation of all counselors is important in any program and includes:
 - a. Discussion of camp and agency policy.
 - b. Planning perspectives for the camping program.
 - c. Camp procedures and routines: supervision, recording, parent contact.
 - d. Individual counselor's use of intake material to familiarize himself with the anticipated group.
2. Discussions geared to consider special needs of blind children involved:
 - a. Information about the philosophy and purpose of integration; the development of the program; its goals and purposes with blind and sighted children, family, and community.
 - b. Specific information about blindness.
 1. Legal blindness, causes of blindness, and etc.
 2. Use of various resources to obtain information involved the consulting agency and available printed material.
 - c. The organization of specific workshops to demonstrate techniques of leading, directing, and teaching blind children. This involved discussion of use of senses other than the visual to acquaint a blind child with surroundings.
 - d. Understanding some of the physical problems and limitations of a blind child is a key to the ability to plan for him in the program.
 - e. The need to see the blind child as an individual. Avoid stereotype concepts.
 - f. A willingness to be flexible in programming and meeting needs of individual children in the group.
3. The counselor begins to face his own feelings about blindness. Idealized and romanticized concepts can impede the integrating process as much as attitudes of fear, rejection, and pity. Leaders must begin to accept themselves as individuals; understanding that they, too, can learn and grow from this experience.



SPEEDING INTEGRATION

THROUGH PROGRAM

Specific suggestions for program planning to ensure maximum participation and enjoyment for all the children at camp.

ACTIVITIES

In which activities can the blind children participate? In which can they not?

How can activity be structured to permit maximum participation by all?

How do the blind children "fit into" program?

Do the blind children require any complex reorganization of program? Do they place any "extra strain" on staff?

PHYSICAL SAFETY AND ORIENTATION

How do the blind children get around the terrain?

Do they need to be guided all the time?

Is staff overburdened by the problem of safety?

LEARNING NEW SKILLS

**Why is it important for the blind children to master new skills?
What skills can they be expected to learn in camp?**

Can they handle sharp tools, paint, fire, etc.?

Does staff need special training to teach new skills to blind children?

The Bronx House Day Camp program consists of two separate camps.

The younger children (age 4-1/2 - 7) are served in the Childrens' Center which uses the nursery school facilities in a city housing project. The children are divided into 5 groups under the leadership of 5 counselors, 5 assistant counselors, 10 counselors-in-training (2 per group), a camp director and an assistant director.

This is a relaxed, informal group program for 100 children (including the blind children) who participate in pleasant and purposeful activity using the varied media of creative play (blocks, music, art media, houseplay, outdoor wheel toys, etc.). Outdoor facilities include large sunny and shaded playground facilities, some grassy area (including a small but effective garden), outdoor showers and a large, pre-fabricated outdoor pool. Once a week, the entire camp goes on a bus trip to some point of interest. Program aims at developing individual potential as well as group spirit.

The older children (7 - 12) participate in a different program. About 275 children gather each morning at the Bronx House to be picked up for a 1 hour bus trip to the Mildred Goetz Camp Site of the Henry Kaufman Camp Grounds (see appendix) at Pearl River, N.Y. The ground is rugged and rocky, none of it paved. The woods are in their natural state. A large T-shaped swimming pool serves the entire camp grounds on a scheduled basis.

Here the program is group centered. Since the campers live out-of-doors for the entire day, the understanding and knowledge of the natural world serve as a key to programming. Each group selects a site in the woodland area of the camp ground to use as a home base for the duration of the season. Fireplaces are built for cook-outs. The construction of other conveniences such as shelters, tables, benches and bridges require the cutting, sawing, and lashing of logs and give campers an opportunity to learn about trees and forest life. Campers also learn about the habits of birds, insects, mosses, ferns, etc., which surround the site. Wading and fishing in the streams; picking berries and baking pies; hiking, fishing, boating and swimming; all of these are fun and adventure. There is also a great deal of interest in gardening, and in the care and feeding of farm animals, especially for younger campers.

Projects related to various cultural and ethnic groups draw on drama, dance and song, and sustain considerable interest. They are eagerly shared with other groups at camp-wide programs. As the group progresses from one experience to another, it begins to increase responsibility for making and carrying out its own plans.

Activities

A day camp program can be a healthy medium for social and emotional growth in the child and for the development of healthy peer relationships. Through pleasant, wholesome activity, the child can begin to understand relationships with other children and to seek friendship patterns which may emerge from group living. The mobility in such a program also stimulates different kinds of friendships amongst the

children and demonstrates to them the varied benefits of flexible and many-faceted relationships.

Specifically, such a program aims:

1. To help a child understand himself and others.
2. To develop a sense of adequacy and self-worth in himself and his relationships to others -
 - (a) through many kinds of relationships
 - (b) through mastery and increased learning of social and program skills.
3. To broaden individual and group horizons through experience in various activities.
4. To participate in democratic group living; making choices in consideration of himself and others; planning and executing plans.

These concepts apply to all children, blind or sighted. To the group worker, the challenge of the integrated program is expressed in the question, "How can I help a blind child fit into such a day camp program?"

Children, blind and sighted, generally enjoy the same activities. Therefore, it became necessary to learn only whether and how these could be enjoyed together. There were relatively few activities in which the blind child could not participate. Success was achieved in crafts, pioneering, outdoor cooking, log-lashing, ball playing (in some individual cases), swimming, hiking, building and construction, fishing, gardening, farming, mass-activities, singing, bus program and games, dancing, camp fires.

Integration was implemented through program because it was demonstrated that more activities could be shared than had been anticipated and more could be shared than not.

Some activities could be shared easily and naturally.

. . . The group was making fish nets. Joe, blind, worked with Harold and Bob, sighted. The children were all able to share the materials. Joe worked easily, making a contribution to the project.

. . . This morning the group went fishing. Edith and Dottie, blind, participated with a group of sighted children. Everybody caught fish. The children really helped one another. Dottie, blind, and Alice, sighted, became very friendly with each other during this activity.

. . . Some activities were structured by staff to encourage joint activity by blind and sighted children so that integration could be speeded.

. . . At the cookout, staff helped to seat the blind children so that they were separated. Edith, blind, began calling to friends across the circle. Tina and Lyn, sighted, answered her. This seating arrangement makes for high spirits.

Activities were planned to provide maximum participation of the children and to use their abilities for the benefit of the group. This helps make the blind children an integral part of the activity and, thus, also of the group itself.

. . . At the cookout, each child was responsible for a special phase of preparation or a particular job. The total success of the cookout depended on the successful accomplishment of the individual jobs. Dottie, Joe, and Edith, blind collected wood with Danny and Rose, sighted.

Such planning on the part of the staff spurred the organization of small informal projects by the children themselves in which the blind children were naturally involved.

. . . I asked Sam, blind, what he was doing. He pointed in the direction of a few sighted children. "See them? They're making a bridge. I have been helping them by bringing lumber to the creek. I'm taking a little rest now," he said.

The degree of competence with which the blind child was able to participate in program was important; because of the status he achieved in the group, and his own feelings of confidence and self-worth. It was necessary, therefore, not only to help the blind child learn and improve his skills but also to make it possible for him to use them with the group.

. . . Frank, blind, played the drums for mass program. We sang "Shalom Haverim." Some of the blind children did a small circle dance. The entire camp became quiet, watching. They were amazed at this performance. Their expressions of friendliness and warmth were obvious.

. . . At the cookout, I saw Frank, sighted, nudge Pete and Hank, also sighted and say, "Look, Howie, (blind) is making his own hamburger. How do you like that!" They were both surprised that Howie was able to hold his own patty over the fire.

The blind children were encouraged to use their special individual abilities and leadership capacities for the benefit of the group. In this way, too, the other children in the group began to see them as individuals; judging them on their merits as such, rather than by their handicap. This was true at all age levels.

. . . Mary's (blind, age 6) unique ability to play the piano gave her much status in the group - in fact, within the entire camp. Sooner or later everyone heard her play. All the children in the group appeared to be aware that her occasional asocial behavior was caused by something other than naughtiness. There is something very winning about Mary's personality and in spite of all her problems, she is an important member of the group and liked by many children.

In a sense, the bus was the first "test tube" for our experiment. From the very beginning of the first season, the bus was a natural place for integration to begin. Even before the first segregated group merged with its sighted peer group, blind and sighted children sat together on the bus and walked together to and from camp. It was here that staff was first able to observe the development of embryonic relationships and begin to understand some problems.

On the bus, the children participated in songs, story-telling, games, program planning, and just plain sight-seeing. Program was initiated either by staff or within the small friendship groups sitting together.

. . . The Red Devils sang songs on the bus this morning. Edith and Dottie, blind, sang along with the group for the first time. Both knew the songs fairly well. I have asked the junior counselor to help them learn the songs. Both girls tell me they have been practising at home.

In games requiring vision, such as naming the cars, sighted children often teamed up with blind children in the group, enabling them to play too.

. . . On the bus, the children developed a quick and easy game of identification. Cars were given numbers - for example, Ford was #1, Chrysler was #2, etc. The whole group then quickly memorized the number code. Some children at the windows would call out the number of the cars that passed the bus, while other children immediately identified the car by the number. This is a memory-association game; the blind children could participate readily and on an equal basis with the others.

On the bus, relationships - the seeds of which perhaps had been sown in more formal aspects of program - could begin to flower. Children often requested a specific seat mate, and soon a child would begin to ask for a blind child because of friendly feelings established at another time.

. . . On the bus trip back to Bronx House, Martin, sighted, and Dottie, blind, played the number game together. Then they began to discuss the day's activities. Martin seemed to want to hold Dottie's hand but was shy. He finally got up the courage to take her hand.

Both faces of socialization were in evidence:

. . . Today Edith, blind, became involved in an argument on the bus. She was angry and swung her fist at Al, sighted, who looked at her amazed. He told me that she is very strong and can hold her own with the boys.

The bus was a natural place to begin to encourage independence. Staff began to observe the development of more secure feelings with the blind children.

. . . Dottie and Edith, blind, both walked from the bus by themselves for the first time.

The bus was also the logical place for brief informal conversation between counselors and children. Here began some of the questions and discussions which were later

conducted on a planned basis with the groups. Here, too, staff could study the sighted children's individual reactions to the blind children.

. . . On the bus, I asked 2 sighted children how they were enjoying camp. Both children were quite pleased. Laura, sighted, asked me how come the blind children could get along as well as they do. I told her that for the most part blind children try to learn their way about by remembering the places where they had been. The children were interested in hearing how blind children can learn.

Lunch time became an informal period in which the children could relate to each other quite freely. Blind and sighted children sat together, engaging in free conversation about food, activity, and a host of subjects in which all the children were interested.

. . . During lunch, Mary, blind, participated actively with the group. She entertained everyone with her bright humor and conversation. She enjoyed telling stories to the group and everyone enjoyed listening. In spite of some of the difficulties she presented, Mary enriched group life tremendously.

The water play and swim program was an activity in which blind and sighted children could join on an equal basis. The swimming pool proved to be a great equalizing medium. Blind and sighted campers alike faced similar problems of fear and insecurity in the water. Thus:

. . . Paul, counselor, said that the children seemed very friendly with Edith, blind, in the water. We had thought this would happen - for many of the sighted children in the group cannot swim or float any better than the blind children.

. . . I coaxed Frank, blind, to jump into the water today at the 3-foot level. He said, "Boy, it was easy. Let me try it again." Some of the sighted boys and girls standing around said, "Gee, look at that blind kid jumping in the water."

. . . In the water we played games with both the blind and sighted children. During the games, Robbie, sighted, threw her arms around Frank, blind, and both fell over to the side of the pool. Frank showed no anger. For the first time, he laughed, saying, "Holy cow, we almost fell over!"

. . . In the pool today, the camp Director approached me and asked where the blind children were. I told him to look for them himself and see whether he could find them. It took him 15 minutes to locate them all in the water.

The successful involvement of the blind children in activity sometimes required a modification of attitude before the activity itself could be modified. As the children learned that they should consider everyone's need to enjoy camp, it became increasingly possible to overcome some difficulties and to modify more camp activities to include more children.

. . . Sol, blind, was unable to play volley ball as he could not see the ball. When I pointed this out to the group, the children were willing to consider an adjustment. I suggested we attach bells to the ball so that the blind children would also be able to play. The children agreed.

Such acceptance can only be achieved through continued efforts in which the leader constantly precipitates incidents and creates the setting for social experimentation, making possible the analysis of experience and discussion about possible changes. This required, first of all, that the leader himself not be immobilized at the thought of blindness; and secondly, that he help the children understand that with a little extra assistance or special direction, the blind children could be included in much more activity than anyone had ever expected.

Sometimes the need to organize an activity for the whole group motivated a discussion about the possible ability of the blind children. In any group planning, consideration is based on the levels and abilities of the individuals within it. Just as the special capacities of some children are used to help the group achieve some goals, so too, the limitations of some members are considered. The leaders became increasingly aware of the need to stress the abilities of the blind children rather than their limitations.

. . . Group 5 went rowing today. Moe, sighted, wanted to know how the blind children could row. I asked the group if they had any ideas. Harry said, "They can row and we can tell them which way to go." Joe, blind, asked, "Can we take turns at rowing?" I replied that this would depend on the water front rules. Edith, blind, became quite excited about rowing.

Generally speaking, program offers opportunities to all children to work through their hostility. Children who have grappled from birth with the problems of blindness need opportunity to express the hostilities inherent in this struggle with their handicap. A free and varied program with understanding guidance and leadership provides an opportunity for a healthy expression of feeling directed toward satisfying goals for the child.

. . . From the first day, Mary, blind, acted out her hostility by throwing things. Everything she could pick up went flying through the air. She seemed to understand us when we explained why this could not be permitted, but continued in spite of it. We soon realized that when she was unoccupied, bored and frustrated, she would resort to throwing. We also realized that she became frustrated and bored because she was not participating in some of the group's activities. Thus, she became hostile. When we explained that if she threw things she would hurt someone, her answer was, "I want to hurt someone."

This kind of behavior is observed in sighted children as well; hostility and frustration are not uniquely characteristic of blind children. When this was recognized, counselors were able to handle the problem with success.

. . . We realized that we had to be firm with Mary about making her pick up whatever she threw and also helpful, but firm, by insisting that she do something constructive rather than just "walk around." However, we found that she became frightened if we asked her what she wanted to do. This kind of decision appeared to be too much for her. Therefore we began to offer a choice, saying "Do you want the peg boards or the clay?" Thus, the problem of the decision and the fright that ensued was minimized.

Obviously, many activities could be shared with little or no change in structure. Obviously, too, other activities challenged staff ingenuity. Staff's ability to meet this

challenge, and its success in making the necessary adjustment, was based on the firm conviction that there was a value in the project itself. Staff attitudes always stemmed from the conviction that the primary focus at camp is the service to the children and the ensuing benefits. Therefore, leaders experimented in many ways to try to include the blind child in as many activities as possible. A telling success story is the one about the blind boy who had always wanted to play baseball but had never been given an opportunity. An ingenious counselor tried this: He stood behind the boy with the bat and at the arrival of the pitch to home play called out "hit" thus enabling the blind child to swing his bat at the proper time. A sighted child held the blind boy's hand and helped him run the bases.

. . . The joy and satisfaction which the blind boy derived from the first connection between bat and ball was overwhelming. The pride and pleasure of his sighted teammates who had helped him achieve this was equally thrilling. Both teams broke into a spontaneous cheer.

The record of a trip by the integrated group sums up significantly and succinctly the value and the possibility of the experience.

. . . Our group went roller skating today. Both Bob and Mike, blind, had a lot of fun. At the beginning of the session they were very dependent on the leaders, but by the end of the session each was skating individually. There were 2 groups from another camp at the rink. The children in these groups did not seem to notice that there were blind children with us. Their counselors, however, had noticed and began to ask us questions. They were interested and astonished to watch the performance and the adjustment of the blind children; the complete acceptance by the sighted children; and the total success of the trip experience for the entire group.

GUIDEPOSTS

1. As integration progressed, it became increasingly easier for the blind child to participate in a greater variety of activities.
2. The blind children displayed a broad variety of interest in program activities and were able to participate actively in most of these.
3. Some activities required modification to enable the blind child to participate with the group (bells on volley ball; teaming up with a sighted child). These made possible his participation in such activities as rowing, bus games, some athletics, i.e., punch ball. Such modification sometimes enhanced the total value of the activity to all the children.
4. There are some realistic limitations to the blind child's ability to share in some activities. These are much fewer in number than it might initially seem. However, competitive athletics, such as tournament baseball, tennis, and some selected similar activities exclude the blind child. In such cases, program alternatives make the exclusion acceptable; especially when it is within the total milieu of acceptance.

In such activities (where participation might prove too demanding to the blind child, or frustrating for the sighted children) flexibility in program makes it natural for the blind child to participate elsewhere.

It is important to realize that such flexibility is really an asset for all the children in daily program considerations. Blind children are not the only ones who cannot participate in tournament baseball; children have colds and can't join their groups for swimming; a child hurts his leg and can't walk far. Thus program must be flexibly structured to allow for alternative activities.

5. Some program media will, by their very nature, always limit the blind child's participation. Yet it was found that there was a real value in giving him an opportunity to experiment with some of these media; archery, coloring and line drawing, painting (handling and mixing paint, painting boxes, and etc.)
6. The specific activity in which an individual blind child may not participate as freely, will also depend upon the child's own previous experiences. There was a wide difference of interest among the blind children themselves. Staff ingenuity and group acceptance are more important factors than the activity itself.

Experience with children and adults has proven that many kinds of adaptation are possible for groups or individuals and it is rather this consideration than the activity which needs to be considered. No blue print can be drawn for this as it is individually determined.

Physical Safety and Orientation

This was a primary area of concern to all the adults involved. Although we realized that all the children would require some physical orientation to the rough terrain, parents and staff were especially concerned for the safety of the blind children at camp.

All the records of the first day reflect these concerns.

. . . On the first day, the group spent a considerable amount of time orienting itself about camp. During the nature walk, counselors showed the children the terrain explaining that it was very rugged and pointing out the spots where special care would be needed.

The counselors for the blind children's group report for the same day:

. . . On our walk, I purposely chose a path which had many rocks strewn about. I wanted to see how the blind children would react to such a rugged path. Marty, blind, said he would like to pick some rocks there. When Frank, blind, stumbled and fell during the walk, he said, "Gee, you know it is very rough in this camp but it is a lot of fun."

A significant incident occurred in the first year in connection with everyone's fears for the blind children's physical safety.

. . . Our area was separated from the main dirt road by the dry bed of a stream, active only in the springtime. The older sighted children in the camp thought that the blind children would find this a difficult barrier and decided to build a bridge for their use. The construction was soon completed and an appropriate ceremony was held. In a very short time, the sighted children discovered that they too had profited; for the bridge became a great convenience to all, especially when the children had to lug lunch bags, milk boxes, and other heavy supplies into the area.

Therefore what had begun as a special "adaptation" for blind children, proved to be an improvement for everyone.

In this incident, as in others, we find verification of our anticipation in the pre-season workshops - that the special needs of the handicapped children might often enrich the total experiences of everyone in camp.

Orientation to the topography of the camp was one phase of physical safety; learning to navigate the rough terrain was another. The record reveals the vigilance and patience of the leaders in this connection.

. . . Howe, blind, fell while we were walking. He began to cry, holding his side. I remarked that he hadn't fallen on his side, but on his backside, and asked whether he was hurt. He began to cry furiously. "I shouldn't have come to camp today, I want to go home." I suggested that he rest a bit and I would help him back to camp where he would lie down. He agreed.

. . . The next day as we approached the same area, Howe began to cry again saying, "I hurt myself yesterday and I will hurt myself again today." I told him that if we walked slowly we could cross the bridge with ease. He said he would try and hold on to the side with both hands. As we crossed together he remarked, "How simple."

Such feelings of frustration, fear and insecurity had to be handled over and over again with patience and reassurance. The leaders' acceptance and willingness to help gave the child the confidence he needed to improve.

This problem did not exist to the same degree for every child. In the case of Howe it must be noted that his difficulty stemmed in part from the fact that he is a heavy child and has general difficulty in walking around. A sighted child with the same build and muscular development might well have similar difficulty. Sighted children also often needed the assistance and patience of their counselors when they fell or hurt themselves.

As the summer progressed and the children had more and more experience in free movement around the camp grounds, the blind children became less fearful.

. . . Joe, blind, walks about from area to area with no difficulty although he does walk slowly. He said to me, "I love to walk around this way, easy and free.

. . . Today Mike (partially sighted) worked on his project while we went swimming. As we returned, he came galloping down the road to show us the boat he had made.

The whole problem of physical safety is integrally related to the broader one of motivating independence in the children. The leaders who worked directly with the blind children helped the other counselors become aware of this.

. . . Joe, blind, is constantly helped to move from place to place by someone. The sighted children sometimes become so over protective of him that they do not permit him to move about independently. I have asked the children and the counselors to refrain from doing this and to give verbal guidance only, to permit him to move about by himself. In general, I have asked staff and children to let the blind children walk by themselves as much as possible.

As they helped the blind children learn their way about, the leaders began to refer to the use of non-visual senses. The walk from the bus to the camp site provided "game opportunities" for everyone. The devices developed specially for the blind children in no way impeded the sighted children and often provided a new dimension to their experience.

. . . The group began to look for guide posts to learn the way from bus to camp site. I told them we were "Scouts blazing a trail" and described the ways in which the early pioneers found their way through the forests. At the bus itself, the ground beneath our feet was firm but soon we would come to a gravel path. Here we chanted with the children, "crunch, crunch, a bunch of crunch"

and similar fun rhymes. Then we would come to a rocky dirt path and all the children noted the change in the way it felt.

. . . There was a brook a short way down and the sighted children would call, "I see the brook," while the blind children would say, "I hear the brook." Often we would stop and listen to the sound of the brook.

. . . The brook was a mid-point on the path notifying us that we would soon hit a fork. Here stood a fascinating, enormous old tree - a point of interest for everyone. We noted the rough bark, heavy branches, etc. The tree was really very old and we played a game to see how many children could fit around its huge trunk - thus providing a measure for the blind children but also adding a dimension to the size concept of the sighted children. The tree signified that here we must bear right. Soon we came to a wide open space. At this point Bert, blind, would often say, "When I leave the tree I feel the rush of air!"

. . . At this point in our walk, we developed a buddy system where sighted helped blind across a soft trackless green grassy area. Beyond lay a rough path, strewn with rocks, and here the buddy system was effective for all the children for they needed to help each other in crossing safely. The deep ditch which marked our site boundary could be crossed by the little bridge we had built and everyone enjoyed using it holding the hand rail. At our site, we had marked the unit areas with raised letters, A and B, which the blind children could feel and the sighted children could see. When we reached the camp site, the "adventure" was over. The blind children were quick to learn their way about.

It is clear that a key factor in judging the degree of a blind child's independence as against the amount of help he may realistically require, is the counselor's readiness to address himself to this problem and extend himself in its solution.

Learning New Skills

Part of all children's enjoyment in camp is derived through the acquisition of new skills and the sense of achievement this brings. Some blind children, however, face more problems in this area than do most of their sighted peers. Some may not yet have completely mastered some primary skills generally expected of children of their age. They may need help with some aspects of dressing, moving about, eating and toileting. Similarly, they are less experienced with the various craft media, and may have had little or no opportunity in sports or athletics. Handling tools which may be sharp or dangerous, or building campfires, may also have been completely taboo for obvious reasons. (This is true also of some sighted children. However, normal parental fears concerning such activities have sometimes been intensified to an extreme with the families of blind children.)

The more completely he masters these basic, routine requirements of daily living, the more fully will the handicapped child be able to participate in other activities. Therefore, the group leader was charged with giving direct, patient, sensitive help to those children who required it.

. . . Yesterday Joe, blind, couldn't zip his zipper. We spent 15 minutes learning how. This morning he was able to zip it. I will discuss this with his mother, for both parents should understand that as Joe becomes more proficient in such skills, he will become more independent and happier.

The more capable child, blind or sighted, was asked to help other children.

. . . Martin, blind, dresses with more ease than some of the other children and so he is able to help them. Today he helped some of them tie their own laces after swimming.

The leader studied some of the problems common to all the blind children and found ways to overcome them.

. . . At the pool, I have asked all the children to sit in one area when they undress. This helps keep their clothing together and makes it easier to find when they have to dress. This system has helped them to finish dressing more quickly. (This is a good device for the sighted children, too.)

Some of the requirements for teaching blind children are similar to those involved in teaching sighted children. Patience, sensitivity, and adaptability are basic ones. As teaching is begun at the child's own level, the leader must know and understand the individual child in order to find a point of beginning.

. . . Howie, blind, has been learning the use of saw and hatchet. We are going slowly on both tools until he gets the hang of it. I've broken down each skill, part by part, and have used this in teaching him and the other children how to use the tools.

. . . I showed Martin, partially-sighted, how to drive nails into the wood. He enjoyed this. I showed him how to move his fingers so that the nail meets the hammer properly and he learned to do this easily. When he realized what a difficult job he was doing, he said, "I would like to try nailing other wood, too."

. . . The group played punch ball today. Sam, blind, hit the ball to the sighted children while they fielded it. I noticed that he was hitting the ball to the ground. I showed him how to hit underhand and when he tried this he found that he was able to send the ball over the heads of the fielders, something he had been unable to do before. He was delighted at being able to play with the other children.

The leaders felt free to experiment and find new ways of helping the blind children learn as many skills as possible.

. . . Fred, blind, wants to learn to use a knife. I told him that if he could bring one from home, I would show him how to use it. Martin also wants to learn.

. . . Martin and Fred, blind, wanted to paint some signs with the sighted children. Martin helped mix the paint. He and Moe, sighted, volunteered to paint

the first sign. Harold, sighted, joined them, saying "I'm surprised at seeing Martin and Fred doing such good work."

. . . One purpose in gardening was to help the children use the tools - hoe, rake, shovel, and watering can. Each child was given a turn. The group cleared the ground of roots, turned the earth, and placed stones in this section. They were very interested in the activity. We gave each child an opportunity to feel, touch and explore at each point.

Adaptability and understanding of the individual child's ability will dictate methods of teaching skills, i.e., the counselor would use more words and descriptive language instead of visual demonstration, will refer to sense of touch and hearing in the learning process, etc. Sometimes in preparing to teach a new skill to a blind child, it is helpful for the counselor to blindfold himself and go through the motions of learning - thus experiencing to some extent the learning process without vision.

. . . Previously, whenever we did any crayoning, Richard, blind, seemed bored, and was unsuccessful. Today, when he began to get restless, I taught him to feel the difference between the colored area and the blank area of the paper. He was quickly able to identify each area and therefore colored the entire area with great success. He needed occasional encouragement and when he was finished, I helped him make a horn out of the whole colored paper. He derived great satisfaction from this activity.

The leader helped the blind child to try to participate in many more activities than he had ever experienced. It was recognized that some of the participation was limited and some of the experiences might yield to the blind child a set of results different from those derived by the sighted children.

. . . Martin and Joe, blind, were both given an opportunity to shoot the arrow in archery. They both had some success in delivery, although their arrows did not hit the target. Some of the sighted children had been able to hit the target. Nevertheless, both boys enjoyed the experience.

The growth of physical independence and the learning of skills are both factors in total personality development. They were also the tools through whose use the children began to relate to each other in the camping program.

GUIDEPOSTS

1. Safety and orientation are of primary importance. Counselors find it helpful to blindfold themselves to "see how it feels". Specific information on guiding and leading technique, learned in the orientation session, bears reviewing.
2. Blind children can be encouraged to become as physically independent as seems reasonable. This makes it more possible for them to accept help easily when they need it. Sighted children can learn to give help so that it neither impedes nor frustrates anyone.
3. Children all profit from learning to use senses other than the usual in moving about freely and in learning.

The development of the individual's ability to perform and participate as an equal is an important factor in acceptance. Therefore the teaching of specific skills to the blind children - both program and social skills - is a vital part of the integration process.

4. Blind children can master new skills when these are taught with reference to the non-visual senses (feeling, hearing, etc.)
5. The teaching of new skills must be individually geared. This is true of teaching generally.
6. Blind children should learn to handle tools, knives, matches, etc. and can be taught. The safety problems and methods involved are universally applicable.
7. Some blind children may need more help than their peers in performing routine tasks of dressing and eating. Counselors can find ways of helping them learn - and employ the assistance of parents at home.

Patience, acceptance, and understanding are basic to success in teaching new skills. Reassurance, encouragement, and emphasis on individual abilities and strengths are important techniques.

THROUGH RELATIONSHIP

Relationship and mutual acceptance are basic to the enjoyment of camp by all children.

THE LEADER

The leader as the interpreter of the experience.

How does he use his own relationships with the children to motivate intra-group friendliness?

What are the leader's goals with the individual children, blind or sighted?

Do the needs of the blind children place excessive demand on the leader's time and attention? On the other children?

TALKING THINGS OVER

How is discussion used to promote good relationship? What are the children's needs to talk about their experiences?

How does discussion, formal and informal, help to clarify questions and dispel misunderstanding?

How can the children (both blind and sighted) be helped to understand blindness. How does this understanding speed acceptance?

FROM PITY TO RESPECT

What is the difference between pity and respect? Which of these attitudes is preferable?

What are the sources of hostility in the blind children? In the sighted children? What role can hostility play in the final development of understanding and wholesome relationships? How is this achieved?

The Leader

The development of relationships between blind and sighted children was both the crux and the core of the entire experience. The whole purpose in this program was to foster acceptance and understanding between two groups of children heretofore segregated from each other; and in doing this to help the blind children live normally and confidently with blind children, each giving and taking on his level of ability but all functioning together with implicit acceptance of one another.

Acceptance would have to grow from a mutual trust, respect and understanding amongst the children; and was to stem from the experience itself plus the leaders' ability to interpret this experience in a manner acceptable to the children. Through his own relationship with the children in his group, the leader creates the setting in which such acceptance can develop. The children, accepting the counselor as their leader and friend, can trust him, take direction, and enjoy his company. Thus, as soon as he can, the group leader first finds ways of relating to each child within his group - blind or sighted.

. . . My major role today was to get to know the children better and to establish a warm, friendly relationship with them.

. . . Joe, blind, has formed an attachment to me, staying with me wherever I go. When he saw me smoke a pipe he suggested that the group make pipes and that we all smoke them together at the camp site.

. . . I let Frank, blind, feel my lighter. I pulled out the inside to show him what it was like. He asked if I had anything else in my pocket. I pulled out my harmonica and played a song. I let him try to play the harmonica and he laughed - the first real laugh I have heard from him. I asked him if he would like to learn to play and when he said he would, I suggested he ask his mother to buy him one and perhaps we could practice together.

. . . Martin, blind, wanted to hold my knife and I let him carry it through the day. He played games with it. I hope that by giving him this support, he will find confidence in relating to the other children.

The leader's warm, friendly relationship with the children gives them confidence to move out toward their own peers. From the beginning, also, he tries to develop the spirit of group cohesiveness and group awareness, helping the children to establish wholesome work and play relationships. Sometimes they fight and sometimes they work together. The leader helps them let off "steam," but he also shows them constructive ways of resolving their difficulties and getting along. The blind children, being no different in this respect than others, require that the leader handle such incidents with them as he would with any other children.

. . . Fred and Joe, blind, began to wrestle and tickle each other on the way home. They were having such a wonderful time, I let them continue for a while, realizing that for both boys this was an opportunity to externalize some pent-up feelings. I watched closely to make sure that no one would be harmed. I believe, that as a result of this contact, these 2 boys engaged in the lengthiest

conversation that either of them had had up to this point at camp. It seems that each day brings new relationships and friendships.

In helping the children get along with each other, the leader understands the fears and attitudes of both blind and sighted children; at the same time he never loses sight of the individual needs of the different children.

With the blind children, he is aware of specific and unique goals.

1. To help the blind child face the facts of his blindness, to help him understand that blindness is a limitation and a handicap, but that it is not a fault or a disease.
2. To help the blind child overcome some of his fears, to learn how much he can do, and to be willing to try new things.

. . . Joe, blind, does not seem to wish to become involved with the sighted children. He seems to be threatened. I have been trying to help him gain some confidence, hoping that this will enable him to relate more easily to sighted children.

3. To guide the blind child towards increasing independence with the ultimate goal of functioning happily and creatively with his sighted peers.

. . . Bob has become much more self-sufficient in some of the basic chores. After I explained how the lunches are stored, he readily handed in his own lunch. He has learned to board the bus and does this himself with only slight aid from other campers. He is learning to be less dependent on counselors and to accept assistance from other children.

. . . The cookout was a success - Mike and Bob, blind, both participated. Bob on the firemaking committee, Mike on the serving and cooking committee. This was a good new experience for Mike. He couldn't understand why he couldn't keep for himself all the food he had cooked; but after I explained the function of the serving committee, he graciously served the other children.

4. To help the blind child accept limitations and control, both as an individual and as a member of a group. Thus the blind child is helped to see himself neither as a dependent nor as a privileged addition to - but rather as an equal member of - his peer group.

. . . Mike, blind, is really considered an equal by the group. Today he went to get a drink. He tried to get ahead of the other children, but they wouldn't let him. They told him to go to the back of the line like anyone else. He didn't argue, but complied.

. . . Joe, blind, often requests something extra for himself. This time it was cookies and juice. I told him that each member of the group is entitled to the same share of refreshments. Joe felt he should receive more than the others. I asked him why, and he said "Because I'm blind." I refused him with a reminder that

we had often discussed the fact that while blindness necessitates additional assistance, it does not entitle one to special privileges.

. . . Joe, blind, started to throw rocks. We warned him to stop but before he did, he hit Naomi, sighted, in the head and she started to cry. Joe heard the screams and turned pale. After attending to Naomi - fortunately nothing serious had occurred - I walked over to Joe. He sat with his head bent, hands over his eyes and said immediately, "I'm sorry, I'll never do it again." I told him that if he would like to throw rocks, he must first ask a counselor whether it was safe. Throwing rocks could be as dangerous to himself as it was to others. "I feel very bad about it," he said, "and I'll never do it again."

5. To help the blind child develop a patience towards the questions and lack of understanding of the sighted children. The blind child needs help in explaining his blindness. This has a dual value - for in explaining himself, the blind child also begins to understand himself a little more clearly.

. . . Edith, blind, has shown considerable displeasure with the sighted campers. "I don't want to sit with them," she said, "I'm sick of them, they annoy me."

"How do they annoy you?" I asked. "They keep asking me questions," Edith replied. "What kind of questions?" I asked. Edith said, "They ask me if I see and how I see and what I see. I don't want them asking me questions like this ever." She spoke very loudly when she told me this.

The leader handles these matters with sensitivity. He knows when such questions can be pursued in a group and when the answers to them might hurt a blind child's feelings.

. . . Roberta, sighted, asked, "How do the blind children find their way so easily."

Dottie, blind, said softly, "I . . ." her words trailed off at this point and I did not wish to press her further as it was obvious that she was uncomfortable. She had lowered her head and couldn't pursue the discussion. Perhaps soon the time for a full discussion will come.

When the occasion presented itself, the leader explained blindness frankly and tactfully in a natural manner; dispelling the fear and mysticism which may surround it in the minds of children.

. . . A bee landed on Robert's lip. All the children began to scream but he sat still. I brushed the bee away and he didn't get stung. I said, "You see children, Bobbie was brave, he didn't scream." One of the boys said, "That's because he's blind." I asked what he meant and he answered, "That means you can't see." Stan, sighted, said, "What does 'legally blind' mean?" and I explained the difference between Robert's total blindness and Mike's partial vision. Roberta said, "Sometimes we are born blind." I said that was true and told the children that some children might be born with only 4 toes . . . others without other parts of the body that we needed to function. A blind child is born without full development of vision.

This sensitivity on the part of the leader frees the sighted children to ask questions about blindness, the answers to which further serve to present the handicap realistically.

In their attempts to understand their blind friends, the sighted children experimented. Here is an example:

Moe - Could we walk like we were blind?

Harry - I want to see how he does (referring to Joe, blind).

Moe - I feel like I'm going to fall.

Harry - I still don't know how Joe is able to walk straight without falling. It feels like you're placing your feet in the air and you never will come to the floor.

Moe - I feel like I'm going to fall backwards.

Harry - I feel like I'm moving sideways.

Moe - What were you thinking about while you were walking with your eyes closed?

Harry - What would happen to me if I fell down? Would I hurt myself?

Such questions and experiments were accepted by the leader who understood the purpose. His own acceptance of the blind children had set the stage for this kind of purposeful and constructive learning and groping.

Other questions referred to some of the habits of some of the blind children, such as rocking while they speak, rubbing their eyes very hard, etc. Here again, while the counselor may have been unable to provide analytical interpretations for the children, he was able to help them accept some of these mannerisms and not to be disturbed by them.

As the sighted children began to accept their blind friends, so too, they became sensitive about their feelings. For example, there was a great deal of hesitation about using the word "see" with the child who cannot see. A delicate handling of this by a leader is recorded as follows:

. . . Lila, counselor, remarked that her C.I.T. was afraid to use the word "see" in front of a blind child. "How did you handle this?" the Supervisor asked. Lila replied - I told her that seeing can be done in many ways. Some see with their eyes; others do not. Many of us who have vision see things in different ways. I tried to help the C.I.T. understand that blind people use the word "see" not so much in reference to their eyes as to its true meaning - that is understanding or envisioning a concept.

Such consistent interpretation, sensitivity, and understanding was reflected in the growing ease of the children's relationships with each other.

. . . Dottie, blind, and Laurie, sighted, played a game called colors. You try to identify the color of things, like socks, shirts, etc. This is really a mem-

ory game. Laurie, sighted, had a difficult time remembering the color of her socks. Dottie knew all her clothing colors. We began to ask the children what color hair certain people have. Dottie was able to remember the hair coloring of several people. Laurie, sighted, asked, "How do you remember colors so well?" Dottie replied, "I ask people what color their hair is." She told me, "I like to play the game of colors because it's loads of fun and helps me to remember people."

Remember, that a short time before this game, Dottie couldn't bear to discuss another aspect of her blindness.

Edith, who had been so impatient with the sighted children when they asked about her blindness, was later able to have the following conversation:

. . . Bob, sighted, wanted to know how much Edith, blind, can see. I explained that she was totally blind and noted a surprised look on his face. He asked me, "How can she learn so quickly? How does she learn in school?" I replied, "Why don't you ask Edith?"

He walked over to Edith and asked, "How do you learn in school?" Edith replied, "I use a braille typewriter and stylus when I write sometimes." "How does braille work and what is it?"

Edith replied, "It is raised dots which I read with my fingers."

"How else do you learn?"

"I listen to my teacher and I get plenty of homework, I sure do," replied Edith.

The leader who sees each child as an individual can help to dispel social misconceptions of the stereotype of blindness, a factor which has helped keep the blind person a social isolate.

. . . James, blind, was with our group for the first time today. This proved to be an interesting experience for both counselors and children. We all seemed to have formed a stereotype of a blind child, based pretty much on Joe's behavior. James, completely blind, manifested none of this behavior. He is well adjusted, well balanced, well coordinated. Marty, sighted, commented on his physical appearance. I explained that he was blind. Marty was very surprised. It was difficult for him to believe this as James does not behave the same way Joe does.

Often the blind child was able to give leadership and direction to the whole group; in this way he himself achieved status. More important than this, however, the sighted children became increasingly aware of their possible contribution to the total group. In this process, too, the leader is the "catalyst" enabling the development of relationships and mutual respect.

. . . The group had to decide whether to go swimming or to dig worms. During the discussion, Edith, blind, said that last year her group had found a good spot for digging worms. The group then voted to try this spot and decided

against swimming. Edith's suggestion was accepted and she gained some leadership within the group.

As the blind child earns a place of greater equality and acceptance in the group, he is better able to accept group controls and judgments. This advances, still further, his position of equality and the level of group acceptance.

. . . Toward the end of the day, the children caught a frog and decided to keep the frog in the fish tank as a group pet. Edith, blind, told John, the swimming counselor, that she wanted to take the frog home. The other children began to protest. I brought the group together and explained that the frog was really group property. Some of the sighted children were furious with Edith. I asked her to return the frog, but she refused. The sighted children began to howl, "Make her give it back." I asked Edith if she still wanted to keep the frog even though the group had asked her not to. She thought about it and finally asked whether she could have the frog to take home after the camp season was over. I turned to the group and asked if this would be o. k. with all of them. Harry, sighted, said, "I think we should let Edith keep the frog after the season." All the children agreed and the matter was settled.

While it was necessary for sighted children to understand that blind children might not be able to do one or another thing, it was even more important for them to learn how many things the blind child really could do, especially when a little consideration and help is given to them. This was demonstrated in the program itself. The combination of the experience coupled with leader guidance and interpretation resulted in the gratifying outcome of the integrated program.

Talking Things Over

The lesson of understanding and acceptance became more alive and meaningful when incidents were analyzed in the group with the guidance of the leader. From the beginning, the leader helped all the children verbalize their feelings, thus enabling them to understand their feelings about a specific issue or about other children. Early in the first season, before the blind and sighted children had been merged into one group, the group leader discussed the plan with the sighted children in the 8-year-old group. He asked them what they thought and how they felt about including blind children in their group.

The children's replies were a revealing parallel to the initial reaction of the adults involved in the program.

We don't want them in our group, they would slow us down to a snail's pace.
What will we talk about?
Why don't they go into another group?
How can they walk on the trail?
Won't they hurt themselves?
What do we need them for?

The experience of the integrated program, however, began to effect changes in these attitudes. The leader was quick to recognize opportunities for "on the spot" discussions, to initiate conversations around crucial topics. He thus helped the children

face and understand incidents so that pro-social behavior was strengthened and anti-social behavior understood. Similarly, the group leader knew when the right thing done at the right time clarified a point more readily than words.

. . . The group was building a rock bridge in the creek. Edith, blind, wanted to do most of the building. The leader explained to the entire group that since this was a group project everyone must share the work. He helped them organize the various tasks. Edith understood and the conflict was resolved.

Group planning for program activity recognizes the special need of the individual child in the group, and adapts plans geared to the needs and abilities of all the members. Such considerations guide a group in thinking along democratic lines. Discussions referring to the abilities of the blind children helped to dispel misconceptions as to what they could or could not do, and served to help the sighted child achieve a more realistic understanding of his blind companion.

. . . Gene, blind, played punch ball today. He was not very successful in hitting. I asked him if he'd ever played before and he said he had but never had any success. I was finally able to show him how to hit the ball. One of the sighted boys said, "Golly, I never thought Gene would ever hit a ball."

Discussions on topics of general interest involved each child on his own intellectual level and here the blind child emerged as an individual making his contribution to the group.

. . . Both Dottie and Edith, blind, listened eagerly to the discussion on how fish lay eggs. Edith asked a number of questions and participated actively. One result of this vivacious discussion was the decision by the children to make fish nets to enable them to catch fish for their group tank. Edith and Dottie planned to join the others in this activity.

Through discussion, the children learned about each other's feelings and began to realize how much they had in common. Thus, emphasis shifted away from the differences that might be caused by the handicap toward the similarity of children's feelings and needs.

. . . Today the group discussed how a blind child feels when he goes to the dentist. Tina, sighted, thought that going to the dentist is frightening to any child. Dollie, sighted, thought that blind children might be more frightened because they couldn't see the dentist. Other children said they would be frightened in either case. The group realized that they shared similar feelings regardless of vision.

Questions about the blind children led to discussions of similarities in all children.

. . . Bob, sighted, asked, "Why do we let the blind children light the fire at the cookout?"

I felt that the answer to this question would lead naturally to a discussion about general attitudes towards the blind children. I recapitulated for the

children the whole purpose of the integrated program. Then I reminded them that each child wanted to enjoy everything, to learn everything and to try everything. Therefore, we gave every child the opportunity to learn the new skills.

"Won't they hurt themselves?" he asked.

I explained that firemaking could be dangerous to all the children and that all had to learn safe methods. We discussed the need for teaching everyone the right way to handle the materials.

Sometimes a group discussion was planned in advance to help clear the air, to help the children see the real issues of the situation instead of being confused by their feelings about personality.

. . . The Beavers had a discussion today on living together. It seems that during the past week, 3 of the sighted boys have been teasing Edith, blind. The counselor and I decided that the group could discuss "living together" specifically concerning the rights and differences of others.

I asked the children about some of our camp goals. They responded individually with such remarks as, "to help each other, "to have fun together," "to learn to live together" and Edith, blind, shouted, "there should be no fighting, but lots of fun."

The counselor asked, "How do children learn to live with one another?" Shirley, sighted, said, "To learn about what they can do."

Susan, sighted, said, "To see if anyone needs help."

Lyn, sighted, said, "I think I know what you're talking about. You're talking about getting along with all the children."

Susan, sighted, said, "We know the children are different in many ways."

The counselor then asked, "Can we get along with each other in spite of the differences?

Edith, blind, said, "Maybe we ought to speak more nicely to one another."

David said, "Shut up."

Edith said, "You're a dope."

The counselor then said, "This is exactly what I mean about getting along."

Lyn said, "We are all different in this group." When asked what she meant by this she said, "Edith can't do things like we do."

Edith shouted, "I chopped wood better than you did the other day."

Lyn said, You know you are right, Edith, I forgot about that."

At this point we decided to summarize the points for the children and show them that they had already discussed how they could get along together in a better way. I showed them that they had discussed helping each other, con-

sidering each other, and recognizing each other's differences. I told them that they themselves had remarked that some children could do certain things better than others but that everyone could do something for the group. I suggested that now we had discussed these things, we should try to remember them when we worked and played together.

The easy and natural use of discussion made possible some worthwhile "evaluation sessions" with the children. Both staff and children gained insight into the process and into their own development in the integrated experience.

Compare the attitudes of rejection in the early weeks of the season with the changes evidenced in the following discussion held about the mid-point:

. . . We asked the children how they felt about having blind children in the group.

Joe - I like Bob and Mike and like them in the group.

Mike, sighted - I don't feel so good about it. (When asked why he had no answer.)

Dick - I don't like when children are blind. (When asked why there was no response.)

Ed - I feel O.K. I like it.

Roberta - They get along fine in the group because we help them.

Alan - I like them but would rather not be with them again. (When asked why there was no response.)

Brian - It feels - it feels horrible. (What do you mean? Answer - well they could get drowned in the water and that would be horrible.)

Stan - I like them and I like to help them. (When asked why there was no response.)

Steve - They're fun to play with.

We asked the children the question - Do you think that being blind makes them different from ourselves?

Carol - They're not different, they do the same things we do.

Stan - I don't think he's different. He should be treated just like us. Not any more, not any less.

Dick - I like to help them so they don't get hurt.

Marty - I like them.

Stan - If you don't help them it isn't fair. Why? Because why should you play a game and they sit around and do nothing.

And finally - at the end of the season - further development was evidenced in this evaluation discussion:

. . . We talked about how the children felt at day camp and how they felt about the integrated program. Many of the sighted children who took part in the discussion had a few words to say. Many of them repeated the same thing. I believe that the speech made by Moe - sighted - sums up the feelings of most of the sighted children.

He said, "I think that being with the kids who are blind has helped our group in many ways." I asked him if he could explain this and he said, "Maybe being with the handicapped children has taught us something. It has taught us how to live together and learn together."

I asked if anyone else wanted to say something. Edith hopped in. "Yes, she said, "I would like to tell everyone about the good time I've had in camp. I have had much fun in the group - rowing, swimming, dancing and singing. I never had so much fun in my life. The cookouts were great and I liked being with everybody. I hope everyone in the group had as good a time as I had."

Rebecca, sighted, said, "Teaching Sally (blind) how to row was important. I like to help her because she began to row a little by herself."

Dottie, blind, said, "I like to be at camp because I could work with the other children. I made lots of friends with the sighted children."

In another discussion, Gene, the counselor, asked the children, "If you had the choice of being with blind and sighted children next year, or only sighted, which do you prefer?"

All the children said they preferred the integrated group except for Abe, Mike, and Dick. These last children had begun camp in the middle of the season. Paul said that when he had first started with the group he didn't like the blind children but that now he does. Sue said the same thing. They couldn't account for the change. Gene said that practically everybody has the same feelings but that after the first few days he saw that they would all be able to enjoy themselves together and he felt that they had all learned from the experience.

From Pity To Respect

The leaders began to observe a pattern in the development of the blind child's relationship to the sighted children. In the beginning, the blind child related primarily to the leader. Sometimes there was a period of general dependence on the leader, holding his hand, clinging, etc. Then the leader would help the child move toward another child in the group, to a junior counselor, or to a C. I. T. Again, there would be a period of dependence. The child was encouraged towards increasing participation in the group and decreasing dependence on the individual to whom he had attached himself.

This was accomplished in a variety of ways, depending on the child. The leader might try to involve him in an activity with a group of sighted children or give him a special job, or a special part of a particular activity. In each case, the leader analyzed the source of the dependency in order to handle it. Sometimes it was caused by physical insecurity related to the rough terrain, or by problems of dressing or eating. In these cases, the specific problem was analyzed and steps taken. Often, however, dependency arose from emotional insecurity, a sense of helplessness, or fear of rejection; in such cases, the leader gave appropriate understanding, support and assistance.

Leaders also had to handle hostile feelings which arose in the sighted children. Such hostility needed to be seen in the light of the growing understanding that blind children could participate in many things. The sighted child reasoned along lines such as this: "If blindness is just a limitation, and if this handicapped child is to be in my group, then he can do everything just like me!" This constituted a form of acceptance. However, as has been shown, blind children do need various kinds of help and do require some special consideration under certain circumstances.

But, in order to handle the normal hostility within the situation, the sighted child needed:

1. To be able to express his hostility so that it could be recognized and accepted.
2. To be able to understand this hostility so that it might be mitigated.
3. To be provided with opportunity to "work through the hostile feelings" so that, to whatever extent possible, they might be eradicated. The sighted children were helped to understand that additional consideration given to another child did not deprive anyone of his due attention from the leader. Furthermore, through flexible program planning, it was demonstrated that consideration of special needs of individuals in the group often resulted in enrichment for everyone. For example, because blind children could not always participate in athletics, other activities were made available at the same time. These were open to any child who did not participate in the scheduled athletics.

Because of their concern over the blind children's presence in the program, some sighted children often had feelings which did not reflect the true situation. In an effort to help this child see the true situation, leaders provoked discussions about these feelings, pointing out realities and positives.

. . . David, sighted, wanted to know why the blind children are always given things.

Counselor: What do you mean?

David: Counselors give them more things to do with their hands. I like to do things with my hands, too.

Counselor: Like what, Dave?

Dave: Clay, for instance.

Counselor: Dave, I'll be glad to give you some clay, too. I think it's wonderful that you like to work with clay.

Then the counselor turned to the group and asked: "Does anyone else feel the same way?" Further discussion revealed that some of the other children understood that since the blind youngsters could not see they must feel the things they work with. The counselor agreed and then said that the children who wanted to work with clay would be able to do so, that no activity was provided solely for the blind children, simply that sometimes the blind children required alternative programs. This alternative was open by choice to any child in the group.

Sighted children were guided in extending help to the blind children in a gracious way, without feeling that any advantage was being taken of them.

. . . Counselor overheard a conversation between 2 sighted children:

Dick: Joe needs a lot of help up the steps.

Mack: They hold up the group when we come down to the bus.

Counselor: Perhaps there's some way we can help Joe so that he can get to the bus more quickly.

After some discussion, the counselor showed the children how they could help Joe and other blind children by placing their hands on the rail or offering an arm. When such help was given, the blind children could easily keep up with the rest of the group.

The counselor also made it possible for a sighted child to refuse to help on some occasion.

. . . Mack, sighted, was asked to walk with Howie, blind, one day.

Mack: Why should I walk with Howie if I want to walk along the road with my friend?

Counselor: That's all right Mack. I only asked you because we decided in discussion the other day that we would all help Howie when we went walking.

Mack: Do we have to walk with Howie if we don't want to?

Counselor: No, Mack, you don't have to walk with anyone you don't want to.

The leader also showed the children by word and deed that he was available to all of them in proportion to their need for his help.

When some sighted children became annoyed with the blind children during an activity, the leader would separate the problem from the personalities involved, showing that working through a situation helps dispel hostility.

. . . Edith, blind, has a tendency to try a great deal of individual activity. Some of the sighted children have become annoyed with her. When they have brought it to my attention, I have discussed each situation as it arose and helped to solve it with specific suggestions. I try to eliminate the basis for the hostility and get the children to work together.

As the sighted children began to relate to the blind children on the basis of their abilities and personalities, rather than to a stereotype concept based on the handicap, relationships began to be more wholesome and meaningful. The sighted children were free to gauge their own feelings about the blind child more accurately and to determine likes and dislikes realistically.

. . . On the bus, Rose, sighted, said, "I don't want to sit next to Edith." When I asked why, she replied, "Because Edith is loud and noisy. Sometimes you can't hear yourself talk when she's yelling." Edith does yell occasionally. I have asked her to try to talk more softly and she's beginning to understand.

Clearly, this helped the blind child who, because of her limited social experience, needed a better understanding of socially acceptable behavior.

Some sighted children expressed real fears about their contacts with the blind children. In most cases, the integrated program helped to alleviate these fears and evoked healthy growth in the attitudes of most of the sighted children. One outstanding case in point is the story of Lillian, sighted, and Dottie, blind.

. . . Staff was alerted when it was discovered that Lillian was having difficulty in accepting Dottie. It was easy for Lillian to move away from the handicapped children whom she seemed to fear. Staff decided that Lillian, like the other sighted children, needed help. On the bus, Dottie was involved in songs and games with the other children. Staff felt that when all the children are so involved, Lillian is less apt to withdraw. In fact, by making the games more interesting, all the children are encouraged to participate and have more fun.

There was a noticeable change in Lillian's attitude when she began to realize Dottie's abilities in the games. Dottie played charades and spelling games; she could sing songs and tell funny stories. At first, Lillian insisted that she would not play with Dottie because she was blind. Lillian once indicated that blindness might be contagious. She began to accept Dottie when she discovered that a visually handicapped child could have fun just like a sighted child. This was a day by day process. One day the leader noticed that Lillian seemed to want to participate in a group which included Dottie, but that she seemed to be fearful. The leader introduced games of various kinds. Dottie did very well and the whole group was interested. The very next day, Lillian was seen to speak to friends of Dottie's and on the third day after that, she spoke to Dottie herself. Later that week, Lillian and Dottie rode together on the bus and Lillian said, "I like you, Dottie, will you be my special friend?"

Staff "set the stage" for Lillian's changed attitude, but it was Dottie herself - through personality and participation - who nurtured the change in Lillian. Dottie's ability to play with all the children, and her acceptance by the other children sparked Lillian's interest. Bringing the children together in the bus during the 2-hour period helped to produce the change. Basically it was staff awareness; the sensitive, slow but explicit policy of providing wholesome opportunities for getting together; the atmosphere of play and relaxation; and, last but not least, Dottie's winning personality.

On the other hand, in some cases, such feelings were not resolved. A case in point was H.G., a sighted youngster who manifested symptoms of atypical social behavior. H.G., who had difficulty in relating to many children in camp, showed great hostility toward the blind children. He constantly created situations in which it was evident that he was attempting to bait and provoke George, a blind child in his group. It seems clear that the well-adjusted, sighted children were better able to accept the presence of blind children and to establish relationships with a minimum of fear. It seems clear also that staff must consider both children involved in the relationship; understanding the limitations and special needs of each.

The sighted children were encouraged to accept the blind children as their equals and not their dependents.

. . . Howie, blind, and Randy, sighted, pushed each other about today at the water fountain. Howie said, "I'll knock your block off." Randy said, "I'll push you through a water bucket.

. . . Howie tries to use his friends in a dependent way. He asks them to carry his bag. I have insisted that he carry his own, trying to show him that dependent relationships are not real friendships.

Thus, the sighted children as well as the blind learned the difference between friendly help and dependency. The sighted child began to accept his blind peer, extending help in a spirit of respect instead of pity. Blind children began to accept help (some forms of which they will be required to accept all their lives) in a gracious and self-respecting manner, rather than in a self-deprecating and dependent manner.

For example, contrast this record of July 1st . . .

. . . As I see it, Joe is pitied by the group. Many sighted children walk up to him, peer into his face and say, "How cute you are." They are constantly looking for ways to help him. This is a pitying kind of help.

. . . with these notes at the end of August . . .

. . . Harry, sighted, said to Joe, blind, while crossing the bridge, "Joe, the hand rail is broken, let me hold your hand. You hold mine and we'll cross the bridge together."

Joe: Thanks, Harry.

Harry: Here, I'll take your elbow (he had been shown how).

Joe: Fine, let's cross together and sing a song.

Helping and working together in a cooperative spirit became easy and natural after a while.

. . . After gathering wood for the lean-to, we began to lash it.

Counselor: Who wants to learn how to lash?

All the boys: Me!

Joe, blind: How do you tie the wood together?

Harry, to counselor: You show me and I'll show Joe.

Integration implies mutual acceptance. This took many forms, group and individual, verbal and non-verbal, and was evidenced in many degrees. It resulted from many factors in the program. Most beautiful were those incidents in which acceptance was evidenced simply, directly, easily and wholeheartedly in the daily living experience.

. . . Martin came back to camp today after a week's absence. The group broke into a spontaneous cheer for him and sang its welcome song.

. . . Today, Robbie, blind, fell asleep on the bus and Martha put her arm around him and he put his head on her shoulder.

. . . When Mike wanders, the other children no longer tell me about it. They simply go over to him and help him find his group.

. . . At the pond we were all talking about the fish and the goose. Mike was running around quite excited. Suddenly, the goose ran up on land and nipped him. He took off like a bolt of lightning, laughing as he ran. He came to me and said the great big fish had bitten him. The children laughed and I explained that it was a goose. He was very happy and excited and said, "I can't wait to tell my mommy." After this experience, the other children seemed to "warm up" to him.

. . . Edith, blind, and Bernard, sighted, constructing a dam for a small fish pond:

Edith: Bernard, please bring that rock over here.

Bernard: Which rock, Edith?

Edith: The big rock, you dope.

Bernard: I don't like you to call me a dope, Edith.

Edith: I'm sorry that I called you a dope.

Bernard: I'll forgive you. Which rock do you want?

Edith: I think I'm holding one which will fit.

Bernard: I think you're right. You go ahead and pick the rocks, Edith, and I'll carry them for you.

Here are examples of a wonderful exchange among children, working and playing together - regardless of differences - in a wholesome and cooperative manner. Such incidents are both proof and promise that integration and real acceptance are human possibilities.

GUIDEPOSTS

1. A primary requirement was the leader's acceptance of the program and his willingness to experiment in order to speed integration.
2. A leader's sensitivity and understanding is equally important in his relationships with the blind and sighted child.
3. The leader must feel comfortable with the blind child in order to help the sighted children accept him.
4. Campers who were relatively stable and who enjoyed positive relationships with peers and adults were more accepting of the blind children than those whose behavior presented special problems. These latter either withdrew from contact with the blind children or, on occasion, evidenced awareness of their presence through negative attitudes and actions.
5. Experience and familiarity speed acceptance.
6. Use of discussion with both blind and sighted children – separately and together as the situation dictated – was valuable in speeding understanding and acceptance.
7. Questions about blindness, its nature, causes and limitations, etc., need to be handled by the leader with frankness, honesty, sensitivity, and tact.
8. The acceptance of the blind child as an individual helped to eradicate the stereotype concept of a blind person. The more varied the contact between blind and sighted, the easier to dispel the stereotype as the blind child was seen more and more in the light of an individual personality and less within the framework of his handicap.
9. A wholesome group situation permits the expression of hostility, can then be explored – in group discussion and at individual levels – as the situation seems to indicate. Thus, being permitted an acceptable outlet, the hostility is neither repressed nor judged and can be handled, mitigated, and ultimately dispelled.
10. When alternative activities were opened for the blind children, the sighted children needed to be helped to see that nothing was being taken away from them.

THROUGH SUPERVISION

What goals are stressed in supervision? What are the aims of the supervisor and leaders in relation to the blind and to the sighted children?

How does the supervisor help the counselor explore his own feelings about blindness; organize program and group structure to accommodate to the needs of the children?

Do the blind children involve an excessive amount of supervisory time and effort?

Is supervision different in this program?

How are staff meetings used to help the leaders?

The orientation period is only the beginning of an agency's effort to enable counselors to do an effective job. The organization of staff time throughout the season provides for an exchange of experience among staff members and between supervisory staff and individual counselors through:

1. Weekly staff meetings.
2. Weekly individual conferences between counselor and supervisor.
3. Bi-weekly group conferences of supervisor and co-leaders.
4. Daily logs kept by all counselors to record group experiences and individual behavior of the children.
5. Regular camp visits by consultant staff of Guild (Director of Group Work: Case Work) to review and discuss experiences of the blind children, problems and progress of the integration program, contact with the family, and the need for casework involvement on a sustained basis.
6. Regular conferences among supervisory staff of both agencies held throughout the summer.
7. Important to note, also, the constant informal exchange of experience among all staff members: for during these times valuable "on the spot" help was expended by staff members to each other.

Through all of these supervisory channels, the counselor is helped to see himself as a human being who may not be able to relate in an equally positive manner to every child in his group, blind or sighted. Sometimes the counselor begins to realize that a child's problems stem from sources other than the visual handicap.

. . . Al, counselor, told me that Edith is beginning to enjoy the pool. "When she first came to camp," he said, "she was frightened of the water but now she is almost able to float by herself." He added, "I really think she is frightened in the water, but not necessarily because she is blind." Then he smiled and said, "You see, I am learning about my own bias and ignorance."

Sometimes a counselor feels uncomfortable with a blind child. It takes some time to recognize, understand, and handle one's own feelings. This problem was discussed frankly in an attempt to help the counselor accept these feelings.

. . . Jane, counselor, said, "I think that Edith (blind) is disturbed." I asked, "What makes you think so?" Jane thought a while and then blurted out, "Because she is blind." Then she paused and said, "I'm not really sure."

Further discussion revealed that Jane was really reacting to some of Edith's social behavior, mannerisms, and problems. When these had been analyzed in relation to Edith's personality and needs, Jane said, "I guess I have

not really accepted Edith as a person and this may have affected my own ability to relate to her and to help her overcome some of her problems."

Thus the supervisor helped the counselor recognize that sometimes a problem with a (blind) child in the group could stem from the counselor's own feelings rather than from her inability to cope with the problem. Helping the counselor, therefore, also helped the group and the blind child to accept the handicap more naturally, less self-consciously.

. . . Lila, counselor, hesitated to permit her group to play "blind man's bluff." When I asked her why, she replied, "In this game we are emphasizing "not seeing" and I think we might hurt the feelings of the blind children in the group.

. . . I suggested that she could use the game to help the situation; for it would give the sighted children an opportunity to realize what it is like not to see. Thus through such a game the children can be helped to understand the feelings of their blind friends.

Individual conferences are geared toward helping the counselor handle specific individual and group problems as they arise; some of these naturally concern the blind children. It became clear that a counselor who might be functioning confidently with sighted children was sometimes insecure with blind children. In such cases, the supervisor extended reassurance and support.

. . . Lila, counselor, came to me with George, blind. She said that George had a lot of wax around his eyes and wanted to know what she could do. I asked George what his mother would do and he said that she washes his eyes with plain water. We took care of it together. Later I asked Lila whether she really had not known what to do. She said she had been uncertain and she probably would have handled the matter the same way by herself if I had not been there.

It was also reassuring to discuss specific questions as they arose and wherever possible to show the counselor that he really was handling problems correctly. Sometimes the counselor was so overwhelmed by the presence of the blind child that he did not realize his own ability.

Supervisory sessions on every level discussed problems in relation to the goals and purposes of the program and therefore helped clarify the needs of all the children. At staff meetings, counselors shared observations of individual children and, by learning more about the blind children, began to see them as individuals.

. . . "Why do blind children always make clicking noises when they walk?"

. . . "Why do blind children always answer "no" even when the negative is followed by affirmative action?"

. . . "Why do blind children always echo an adult's last words?"

. . . These questions were raised at a staff meeting as "General problems of blind children." The discussion showed that the questions really pertained to

individual children and were not characteristic of all blind children (and might also be true of some sighted children).

. . . Clicking noises: In one group there were 2 blind children. One of them did make clicking noises in order to orient herself to her surroundings. However the other child explored without these actions and with more freedom.

. . . The child who always said "no": The counselor soon discovered that when she moved the child quickly into an activity, the negative response disappeared. She also learned that other children (sighted) behaved similarly.

. . . Echoing the counselor's last words: This soon stopped as the child became more accustomed to her counselor, more familiar to her surroundings, and more active in the group. A sighted child might also behave in the same manner.

Thus the stereotype picture of a "blind child" began to fade and in its place there emerged a realistic portrait of an individual child who, like any other, required understanding, love and guidance of a leader - and who needed to be seen as an individual: the same as other children in some ways, different from other children in other ways.

At another meeting staff discussed group acceptance of the blind children. One of the counselors pointed out that the counselor's own attitude was an important factor.

. . . She told the staff that the children in her group had had the misconception that Katie, blind, was unable to walk. In a discussion with the children, she explained to them that Katie walked in an unusual way because she could not see. This helped the other children accept Katie more readily.

Other counselors, too, reported that group discussion had helped to explain and clarify questions about the blind child.

Counselors were helped to handle the problems of the blind children with the sensitivity and understanding given to any child; and to understand that each possible limitation of a child's capacity needs to be explored with courage and ingenuity.

. . . Al, counselor, said that Edith seemed isolated. I asked whether she could use some of her skills with the group. He said that she was very intelligent, and physically capable and he would try.

A positive outcome of this conference was reported at a later time:

. . . "I would like to tell you about Edith and the game that the group played today. Edith was made the scorer while the rest of the group played "snatch the club." Edith called out the score and the numbers of the children to grab the club. It worked out very well. Edith had a real place in the game, and used her skills. She was delighted and the entire group was satisfied."

Thus the counselor was helped to see his role with the blind child as being basically the same as that for any in the group - helping growth along healthy lines; fulfilling individual potentials; following interests; and relating to peers.

Standards of acceptable social behavior and acceptance of control are both important.

. . . Gene, counselor, discussed Bob's, blind, unwillingness to come out of the water when called. We decided that we would give him adequate warning as the time approached for the entire group to be called out. I suggested to Gene this would be a good way to handle such a problem with any child - blind or sighted.

The blind child needs to be helped to observe the same rules and accept the same controls which are applied to everyone.

. . . Lila asked me for suggestions about Mike, blind, who kept wandering away from the group. I suggested that Mike be told he may not wander, and she make him realize that no child is permitted to do so. If he wishes to leave the group, he must ask permission.

An interesting sequel is noted in the record a week later:

. . . Mike is accepted completely by the other children. His wandering has lessened a great deal. This is, in part, the result of the friendships he has been developing with the children in the group, and the fact that he is participating in more activity.

The different needs of some blind children sometimes cause confusion. Sharing this confusion, in conference or at staff meetings, helped to clarify the real problems and enabled staff to plan for them.

. . . The counselor asked whether blind children needed special materials for a crafts project. I asked him what special project he had in mind. He replied that he was anxious to see Edith use her hands more - especially when she sometimes sits and rocks. I asked him what he would do about any child who remained idle while the group was busy. He thought a moment and replied he would probably try to involve the child in some activity of interest. I suggested that the same thing would be correct for Edith.

How much attention to give the blind child was also often discussed. The supervisor helped the counselor work out methods of group organization and group cooperation to expedite some of the problems that resulted from having a handicapped child in the group.

. . . Counselor complained that Edith required the assistance of a C. I. T. or a counselor at all times. He said that the group loses the help of this person when Edith, an individual, needs it. I reminded him that one of the objectives of the integrated program is to help develop independence within the blind children and reviewed briefly how to direct Edith verbally. I reminded him that

she was blind, but not helpless. In fact, her intake material suggested a tremendous ability to orient herself and to participate in physical activities. I suggested that he try to find ways of using this knowledge.

We also discussed the role of the C.I.T. in the group and how to use the present staff more efficiently with all the children. As we walked back to the bus, I showed him that Edith was walking with 2 sighted children while the C.I.T. was walking with 2 other children. The counselor realized that Edith's needs in the group were not necessarily solved by assigning a C.I.T. to her.

It was important to understand that some blind children's reactions are an intensification of similar ones observed in some sighted children.

. . . Lila, counselor, said that Bob, blind, did not want to go to the bathroom alone although he was completely capable of taking care of himself there. I said that bathroom accommodations at the camp site are somewhat frightening to all the children. It is dark and noisy, and the bathroom seat - with an automatic flush - is also frightening. This fear might be intensified in Bob because he cannot see, but could be handled in the same reassuring manner that would be used with other children - sighted - who might also be frightened.

This understanding helped the counselor handle a problem when it arose again in another form.

. . . A significant incident occurred today. Lila, counselor, and Bob, blind, were walking along the path when it began to rain suddenly and Bob began to cry. In discussing the incident with me, Lila wondered why Bob's reaction to the rain was so intense. I suggested that he was shocked by the physical contact of the water hitting him, and that it is his pattern to respond in a very intense manner. I asked her how the rest of the group felt. She said they all seemed frightened, but not to the same extent. I showed her that Bob's reaction was the same in quality as that of the other children but more intensive because he had not expected the rain and could not really see what was hitting him. It was as if someone had suddenly dumped a pail of cold water on you in the dark, I said. Then I asked her how she had handled the fear - and she replied that she had hugged him and comforted him until he stopped crying.

Analyzing a specific situation helped the counselor understand the source of the problem and indicated possible solutions. This gave the counselor a basis for functioning more independently the next time. In connection with special needs of some children in the program, staff continued to develop flexibility in programming to meet such needs of all children (blind or sighted) in the group.

. . . At the staff meeting, counselors discussed possible alternative activities for children who might not be able to join with the group at specified times. It was agreed that children who had colds, or for some reason could not go swimming, would remain in the pavilion for quiet games and individual craft activities. They could also play with some of the farm animals. One of the counselors suggested that sometimes a blind child could not participate in a scheduled athletic game activity - such as a baseball game. At such times, also, the blind

children could be sent to the pavilion with other children who might not be engaging in the activity - and table games could be made available to them.

Much of the material which had been discussed during the pre-season orientation in anticipation of the summer, cropped up as reality problems during the season. And so, the demonstration of blindfolded counselors, the problem of guiding children over rough terrain, helping children learn to eat and dress by themselves - all were reviewed in the light of incidents that occurred in program.

. . . A C.I.T. asked, "How do I help Bob walk along the trail?"

. . . He said sometimes the child falls because the terrain is rough. He agreed that some of the sighted children also fall. I suggested we practice the technique of leading a blind child and demonstrated to him exactly how to do this.

. . . In my first conference with Lila, counselor of the youngest group, she said immediately, "I have loads of questions. What is Retrolental Fibroplasia? Why does Bob put fingers in his eyes? What causes blindness? What did the children learn before they came to camp?"

. . . I reminded her that we had discussed all these questions in orientation and reviewed them again with her.

Armed with such specific information, the counselor was enabled to transmit it to the children on their own level of understanding. The result in clarification made it possible for both counselor and children to begin to develop more wholesome and understanding attitudes towards each other.

At a staff discussion about some individual children, the question was raised, "How does one determine an emotionally disturbed child."

. . . It was made clear that this diagnosis can be made only after careful observation of the child's total personality and consultation with psychiatrists and psychologists. It was important for everyone to remember that a child displaying one or more "symptoms" cannot be regarded either as emotionally disturbed or brain damaged. This discussion centered about the problems and actions of one particular blind child who presented various problems to her counselor. It was agreed that blindness is neither synonymous with nor symptomatic of "emotional disturbance." The same counselor had encountered similar behavior problems in other children in camp and had been able to cope with them. In the case of the blind child, she had become immobilized by the blindness. This discussion helped her realize her ability to handle the problem and the need to evaluate the child and not the handicap.

Good supervision enabled the counselor to grow and develop on the job. Counselors gained learning which was generically applicable, especially in those areas where heightened attention was required by the blind children, i.e., individualizing, flexibility, sensitivity to individual feelings and needs.

THROUGH THE PARENTS

How do camp and family work together?

What were the initial attitudes of the parents of the sighted children? The blind children? How were these attitudes affected by the experience of their children?

What help can the Agency extend to the family of the blind child?

What are the possible implications of this experience for community, year-round family programming?

The presence of a blind child in the family has its impact on all aspects of family living, especially upon the lives of his parents. Feelings of shame, guilt, and bewilderment often result in some degree of withdrawal from normal community contacts. Parents may feel inadequate in the face of some of the seemingly insurmountable problems that arise in rearing their handicapped child. Often, negative community attitudes are added to the parent's own feelings about having a handicapped child and to the realistic difficulty of knowing how to meet his needs. These problems may result in a variety of parental attitudes toward their children such as hesitancy, over-protectiveness, over-concern for physical safety, impatience, confusion, etc. All of these may be manifested in extremes of control or permissiveness with concurrent effects upon the child's own attitude toward blindness, toward his position in the family, relationship to parents and, hence, to the world.

Some parents who turned to their community to help meet the various needs of their growing blind child (education, camp, organized group experiences, individual social contact) may have been rejected by the agency or individual whom they approached. Such rejection reflects the usual attitude of inadequacy ("We aren't equipped to handle blind children"); or fear of consequences ("We aren't insured"); or fears over the possible effect of contact between blind and sighted children. There is, also, often a real lack of facilities for all children which affects the handicapped child as well. Parents thus rejected must again grapple with their own attitude about their child's blindness which they may have found actively mirrored in the community.

The feelings of some parents of sighted children also run the gamut of pity, fear, and rejection. These combined a misgiving over the possible effects of integration upon their own children with the worry that the blind child might "slow down" the group and interfere with their children's pleasure and progress.

Thus, from the beginning, it was recognized that interpretation to the community must begin with the parents of all the children involved. A significant incident, reported during the first week of the camp season, illustrates some of these attitudes in families of both blind and sighted children.

. . . The counselor received a letter from a sighted child's mother requesting that her child "buddy" with a sighted camper in the water and not with Edith, blind. On the same day, he received a letter from Edith's mother requesting that a counselor remain with Edith, blind, during the entire time that she is at camp.

The counselor brought these notes to the Supervisor's attention. The Supervisor suggested that in both cases the mothers were trying to manipulate the situation. The sighted child's mother obviously had misgivings about the blind children. The blind child's mother had fears for her child's safety in the water. This problem would have to be worked through on the parents' level. The Supervisor predicted that as the season progressed, the fears of both parents might well be mitigated and their attitudes might become more accepting.

In day camp, contact with all of the parents is established and retained throughout the camp season. The first link is the initial intake interview. Thereafter, parents attend a pre-camp meeting which frequently attracts a large attendance. In many cases both parents respond. This get-together provides parents with an opportunity to discuss program, value of routines, leadership and new developments.

Later, during the months of July and August, parents meet in small groups with the counselors of their children to discuss program objectives and developments. At the end of the season there is a closing meeting which combines the evaluation with a summer farewell. During the season itself, parents are invited to participate in some activity at the camp grounds: such as a week-end family picnic; attendance at the county fair, which is sponsored as a fun and fund raising feature by campers for Federation. At the Children's Center, the campers invite their parents to a picnic or party.

Counselors are encouraged to maintain close contact with parents throughout the season. In the event of an accident or illness, the counselor telephones the parent. Questions about the campers' behavior are handled with the parents by the counselor, the Supervisor, or the camp Director. Referrals to other agencies are usually made by the Director where indicated.

Once the blind child became part of camp, counselors maintained the same relationship with their parents as with others. Where a child had a specific problem, the counselor and the parents together discussed possible solutions. Where feasible, a counselor offered specific suggestions to help the child keep pace with his group and enjoy greater independence.

. . . When we eat lunch, Sally does not seem to know the location of the food in her bag. I spoke to her mother about this and suggested that they pack the bag together at home. It will be easier then, I think, for Sally to find her own food.

. . . Fred, blind, was very friendly with Mil, sighted, at the cookout. Fred's mother had not given him cookout food. She had given him a sandwich. I will call her and ask her to give him cookout food for the next cookout.

Such individual conferences with staff helped the parents see their children as other interested adults see them. The parents were helped to be more objective, and were therefore free to help their own child, hopefully, with less tension, more awareness, and better perspective.

When this project of including visually handicapped children was introduced to the parents' group at large, the reaction of the parents of sighted children was generally gratifying. At subsequent meetings, they usually requested a progress report on this phase of camp. This was particularly true in the case of the parents of those sighted children who were in close contact with the blind children.

Intellectual acceptance of the project did not, however, eliminate a variety of negative reactions in individual parents. It became clear that their children's experiences would also be a learning process for some parents. Varied degrees of acceptance could be anticipated from the parents, just as from the children. Staff learned to

be patient and understanding when individual incidents which occurred indicated something less than total acceptance by the parents of the sighted children.

The needs of the children helped to determine the kind of contact with parents. For example, in the beginning, the leaders of the older groups wanted to clarify some specific questions with the mothers of the blind children. A few small meetings were held for this purpose alone and proved to be valuable.

. . . We asked the mothers such questions as, "How are you teaching your children at home to find the right side of the clothing they wear? How are you teaching the children to tie their shoes? What specific methods are you using to teach other skills?"

We told the mothers that they could be most helpful in these matters. We all felt, staff and parents, that if these skills were taught by counselors and parents in the same way, children would learn more quickly and we would avoid confusion. Sally's mother explained that she taught Sally to feel for the label in her polo shirt which would indicate both the back of the garment and its wrong side. Johnny's mother described her use of small tacks in the hallway to guide Johnny through the house. We adapted this to camp by placing raised letters to mark sections of the camp site - B for bathroom, C for crafts, etc. Thus the blind children could feel them and the sighted children could see them.

We, in turn, demonstrated to the mothers some of the techniques we were teaching the children such as how to enter and leave the bus. Mothers could then follow through with the same method when the family travelled together.

After these meetings, the leaders were better able to help the blind children learn some skills to put them on a more equal footing with their sighted peers. As the blind children mastered these basic skills of dressing, eating, etc., they were less tense and better able to integrate with the group. Such meetings were found unnecessary for parents of the younger children, for in this age group all the children were learning the same skills and many of them needed the same kind of help regardless of visual ability.

At the small meetings, the parents of the blind children began to feel less "alone" in the special problems that arose from their children's handicap. They were also encouraged to participate actively in the all-parent meeting. When the time and place for the first such meeting was announced, a mother of a blind child asked, "What shall we do when the other parents begin to ask about our children?"

The staff urged these parents to participate actively in the general parent meeting, to ask and answer questions toward speeding mutual understanding. Staff explained that parents could help interpret their children's needs and that an interchange of viewpoint amongst all the parents could be most beneficial to each.

The parents of the blind children were encouraged to see themselves as part of a community of parents, all of whom faced similar problems in helping their children grow. Through sharing experiences all the parents could begin to realize their numerous common problems and needs. The parents of the blind children could be en-

couraged by these similarities, and could begin to isolate the special different problems resulting from the handicap, thus gaining some reassuring and realistic perspective concerning their own children's development.

This discussion brought gratifying results at the general parent meeting.

. . . The parent of a sighted child asked about the progress of the blind children in camp. Johnny's mother (encouraged, I think, by the discussion in the smaller meeting held prior to this one) took the floor and described her son's progress at camp, his improved ability to get around, his pleasure in the program and his enjoyment of the children. Edith's mother then added this story.

"We have a small garden at home. After her experience at day camp, Edith said she would like to try gardening at home. She took rake and spade and went out to dig. Soon some sighted girls from the neighborhood who had never spoken with Edith before stopped to watch her. They asked her what she was doing and struck up a conversation. This resulted in new neighborhhod relationships for Edith."

Thus a third purpose for parent-staff meetings was realized, for staff began to learn about the application of camp learning to daily living.

These meetings helped the parents of blind children realize that they were a real part of a larger community which could give assistance, understanding and support. Thus, the parent could feel less "alone," less "different," and greatly encouraged.

Parents reported that the sighted children's attempts at understanding the blind children - observed by staff in camp - were also seen at home. Discussions at parent meetings served to reassure the parents of the sighted children and to interpret the process to them.

. . . Mrs. G., Henry's mother, sighted, reported that Henry often imitates Joe, blind, at home. Henry experiments walking about the house with his eyes shut, feeling the wall, etc. Staff noted that Henry is very helpful and friendly with Joe at camp and seemed to be genuinely fond of him. We agreed that Henry's home experiments were conducted in connection with his attempts to identify with and understand his blind friend. We explained that this happened often in camp and was part of the sighted child's learning. We described to the parents some of the discussions that developed at camp and how they had furthered understanding and acceptance within their own children.

. . . At a parent meeting, one mother, Mrs. A., mentioned that her daughter Pat, sighted, had been very intolerant of Joe, blind, during the first week of camp. However, in the second week, she told a story about Joe to her mother. Her mother asked, "Which child is Joe?" Pat replied, "Do I always have to say Joe, the blind boy?"

One mother reported with a great deal of pride, "My son's buddy was one of the sightless children and he never even told me about it. I found out only a few days ago. It hadn't seemed to make any difference to him at all."

. . . Another parent reported, "When I visited the camp site and noted the rough ground I asked my son how the blind children get around. He replied, "Oh, mommy, they walk pretty straight. Sometimes we trip and fall, too."

By deepening the understanding of both staff and parents the integration process was advanced. When, at the end of the first season, the parent group discussed the project and its values, it was generally agreed by the parents of the sighted children that the experience had been as enriching for them as it had been for their children.

At the final meeting, too, the parents of the blind children reported that they had noted development and learning in their children over the summer.

1. Improved speech: some of the children learned to speak more clearly, used sentences, increased vocabulary.
2. Greater ease with adults.
3. Newly developed ability to navigate stairs, rough paths, and rocky terrain.
4. Greater responsibility at home for dressing, handling food, etc.
5. Some children had learned to negotiate getting on and off the bus and seemed more free in moving about their community. One partially-sighted child had begun to ride a bicycle.

Answers to a questionnaire circulated among the parents of the blind children showed that they noted general increased independence, ability to relate to other children, and interest in new activities. (Such results are remarkably the same as those noted in sighted children in a day camp experience!)

For the parents of the blind children, too, the experience had been enriching and rewarding. In answer to the question, "What did you learn from your child's experience?" parents revealed that they had gained new insight into their children's needs, their own attitudes, and new understanding of the family situation.

They realized that there were many ways in which they could help their children to live more complete lives. New horizons of activity motivated parents to encourage their children to make full use of their strengths and skills. They began to recognize their children's need for increased opportunities for outdoor play and experience with other children.

They learned that an adjustment of their own attitudes could help their children, i.e., less over-protectiveness, greater encouragement towards independence, confidence and ability, etc. Parents had gained some confidence in the validity of the inte-

grated program to help the real needs of their children and felt that it held forth a hope that their handicapped child could gain acceptance in a sighted world.

The knowledge that their children could be accepted in this community program also encouraged the parents to make new efforts to continue the experience and to have informal contact with children in the community. For themselves, the success of the experience spelled a new level of community acceptance. The camp director reports:

. . . Anyone watching these parents waiting at Bronx House for their children to arrive would have seen a wonderful sight. It was a tremendous morale booster for these mothers to see their children arriving in the middle of an ocean of children just like any other children.

All of this comprised a hope and a promise to each family that its handicapped child might live a more complete and satisfying life than they had originally envisioned.

EVALUATION AND SUMMARY

What values did this program yield to its participants – blind and sighted? To their family? To the community center?

What are the basic ingredients for the success of such a program?

How can an agency use the experience described here to help set up a similar service? What phases of organization are of special note? What, if any, is the additional cost?

How can other service agencies in the community be of assistance in helping a community agency serve a blind child?

"We are functioning normally," said the camp director in the first week of the fourth summer of the integrated program. She pointed to the groups among whom played a number of visually handicapped children happily engaged in activity. This is probably the most satisfying commentary on the project which had concerned 2 agencies for 3 years and which, by the fourth year, had successfully served a number of blind children in an integrated program.

At an evaluation meeting of both agencies, the Director further noted that by the fourth year Bronx House had taken full responsibility for staff provision and training, had fully integrated the blind children, and no longer saw major differences in working with them. The children had been woven into the normal routine of day camp service and program to the point where it was no longer necessary to provide increased counseling staff. Staff competence with blind children increased as staff anxiety and tension decreased.

Both agencies agree that the program had a positive impact on all the children, blind or sighted, and their parents. This program is both feasible and desirable, provided it is structured with thought and understanding. No "blue print" can be drawn, for each setting requires consideration of its specific circumstances. However, this experience has indicated some basic criteria that may guide a valid and successful program.

1. A primary factor for success is the willingness and sincerity of agency and staff to undertake the program, and their acceptance of its values to both blind and sighted children, families and community.
2. It is most important to recognize that implementing an integrated program requires an intensification and a re-application of basic group work principles rather than a new or "special" set of concepts.
3. Any agency serving sighted children in an interested and responsible manner can extend such services to blind children in a program similar to the one described here. Agency policy, intake and staff training are factors of primary importance. There is no requirement for special equipment, leadership, or insurance, etc. The emphasis on sound group work standards and service to total community helps agency and staff focus its efforts toward meeting individual needs in the normal program.
4. Blindness, uncomplicated by additional handicaps (physical or emotional), presents no unusual difficulty to the willing leader.
5. Staff (paid and/or volunteer) will require some information, pre-season orientation, and continuing supervision. The success of any program rests on its leadership - direct and supervisory.
6. It is necessary to recognize that not all blind children can make the most productive use of an integrated camping experience and that here, as in all other situations, an individualized approach is necessary.

7. By and large, there is no important impact on total camp budgeting. Some cost in connection with intake (or possibly some very individualized need, such as special transportation service) may require consideration, and suggests the possibility of cooperating with another community resource.

A valuable inference is the recognition by existing social agencies of the need to coordinate their efforts to provide increasing service to the total community. In the program described here, each agency functioned in a professionally appropriate manner: the specialized agency provided its specific knowledge, assisting in intake and consultation; the community agency provided the service through its facilities and leadership.

An agency wishing to implement such a program within its community can employ available community resources in a similar way. For example, a family service agency might assist in intake (basically, the intake procedure evaluates personality, not handicap); consultative services may be offered by the State Commission for the Blind (which might also assist in referral and case finding).

"Now I know I'm a normal child. Everybody treats me like one." Howie's statement at the end of his first season summed up the most poignant value of the program to the visually handicapped child.

Generally speaking, the anticipated values to both blind and sighted children were realized during the season. The guided group experience was a healthy matrix in which the group leader was able to promote development of sound relationships. As the season progressed, there was increasing acceptance of blind campers. The attitude of the sighted children developed steadily from one of "pity" (which is a form of rejection) to one of friendliness, recognition, and easy, natural helpfulness. Integration was speeded as the blind child himself achieved greater ease in the situation and began to make his contribution to the group commensurate with his growing abilities.

The blind child found that he could "belong", that he was a part of a large, busy, interesting world; that if he made the effort, marshalled his resources, accepted his responsibilities - it was his to enjoy. The experience provided him with a medium in which he could identify with sighted peers and develop a more realistic self-image and a truer perspective for himself. This provided inestimable ego support.

Exposure to a healthy environment tends to evoke a healthy response. Thus, it is felt that even if, in some individual cases, the experience might not have yielded the visible growth that had been anticipated, it still had a wholesome impact upon the blind child.

For the blind children, the experience resulted in:

1. A pleasant summer of fun, relaxation and learning;
2. Participation in group living with sighted peers; sharing plans, decisions, facilities, materials, activities;

3. Learning new areas of independence and self-help;
4. Learning new physical and social skills;
5. Continuation of some newly learned play habits in family life;
6. The beginning of increased acceptance of handicap (spurred by the acceptance of others);
7. A reaching out, in some cases, toward more normal community and family living.

It must be noted, that without parental, family, and community follow-up on such gains, growth is limited - as it would be for every child - to the summer experience. Therefore, the agencies saw an added responsibility in interpreting to all the parents the need for such follow-up. In the case of some blind children, year-round contact with the specialized agency (or a family case work agency) may be indicated.

The sighted children experienced group living on a new and higher level. In their daily consideration of the visually handicapped children, they found that it was possible to have a good time while making it possible for others, too. Some of the sighted children began to realize that life is enhanced in helping others, that there can be pride and pleasure in the achievements of others as well as in enjoyment of your own achievements.

The sighted children learned:

1. To accept the blind child as an individual, judging him on his merits as a person, rather than judging the handicap.
 2. To accept differences in blind children: a facet of learning to accept differences in others.
 3. Not to fear contact with a visually handicapped individual (thus the groundwork is laid for acceptance of other handicapped individuals).
 4. To give in a respecting rather than a pitying way: sharing skills and vision in a constructive manner.
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Both groups in the experience began to learn:

1. A mutual respect for each other's abilities as individuals.
2. The numerous points of similarity amongst human beings that make it possible to live, work and play together.

3. To "emphasize the positive" in each other, deriving benefits from these strengths.
 4. To verbalize feelings, to express concepts and hostilities through words, thus providing the opportunity for working them through.
 5. To accept responsibility for individual behavior within a group.
 6. A natural, wholesome give and take of assistance which is an important and necessary ability in daily living.
-

A final value is seen in the development of a new facet of community center service. In this program, Bronx House demonstrated an additional, valid, desirable, and economical service to a hitherto unserved section of its community. The community as a whole may now begin to consider the possibility of planning to include, rather than exclude, its handicapped citizens.

As a result of these four years of the integrated camping program Bronx House is convinced, as an agency, that this kind of program offers significant service to the community. This program has become part of the fabric of the agency's structure and function.

CODA

Is there anyone who thinks anyone has all the answers?

Is there anyone who thinks "there's nothing to it?"

Experience teaches that every answer leads to a new question, that every search for an answer requires sincere and applied effort.

We do believe, however, that the efforts described here have yielded a set of valuable results for all concerned, and that they point the way to exploration of broader horizons of community service.



APPENDIX

THE CHILDREN

The children who participated in the integrated camping program presented the widest variations in individual personality. Although they were all legally blind, visual handicaps ranged from some light perception to total blindness. (Anyone whose maximum corrected vision is 20/200 Snellen is considered legally blind.) Aside from the visual handicap, there was also a wide variation in personality, interest, intelligence and family background.

Some of the children had never really been involved in play with their peers (blind or sighted); others had studied and played in segregated settings almost exclusively. Some had wider experience. Therefore, questions concerning background, etc., must refer to each individual child.

A blind child's mobility, ability to negotiate steps, etc., depends upon his individual capacity, upon what he has been taught, and how much experience he has been permitted. The important thing, however, is that the blind children who were accepted into the integrated program could all learn and improve their mobility. Even totally blind children can ride bicycles, climb jungle gyms, etc., if they are given the opportunity.

All the children had been shown how to negotiate steps, either using the hand rail or with guidance. Some blind children can use steps with no physical assistance, merely a verbal warning that there are (a given number of) steps to be taken up or down.

The blind children who participated in this program attend either a segregated or a public school - at which they attend special braille classes. Very few of these children could see any color at all. Most of them learned about color, using it as a mnemonic device to help them know the world about them. (The sky is blue. The grass is green, etc.)

THE CAMP GROUNDS

The Henry Kaufmann Campgrounds was conceived during the early part of 1950 after several studies by the Federation of Jewish Philanthropies revealed that day camping had become an important part of the summertime program of the community center. The Henry Kaufmann Campgrounds provides the permanent structures and facilities for individual agency day camp sites and the over-all maintenance supervision and direction of the Campgrounds. The Campgrounds also furnishes staff supervision of the swimming pool and boating period, a registered nurse, a store keeper and commissary, orientation programs, and supervises in the planning and construction of work projects.

The main objectives of the Henry Kaufmann Campgrounds are to provide day camp facilities for New York City children in nearby rural settings. The recreational facilities are similar to those provided by resident camps with swimming pool, lakes

and parks, athletic fields, nature trails and cookout areas. The Bronx House Day Camp is located at the Mildred Goetz Site, Pearl River, New York, and utilizes three shelters in this beautiful 100-acre wooded tract.

EYE CONDITIONS IN CHILDREN

Many eye conditions in children are static while many others are progressive. All need to be diagnosed early, receive adequate ophthalmological care, if the optimum use of the eyes is to be obtained with the least loss of sight. The following list is given of the eye conditions in children:

PROGRESSIVE

- High Myopia Nearsightedness: a long eye in which the rays of light are focused in front of the retina. Children with such a condition are usually instructed to curtail their near eye work and to avoid overactivity such as strenuous exercise or lifting heavy objects. Treatment is directed toward curing any eye inflammation and improving general health. Children with high myopia should have a complete eye examination at least once a year. Glasses, which bend the light rays so that they focus on the retina, are usually prescribed. Illumination for reading and indoor play should be good and free from glare. In class, child should sit near the front of the room, near a window or within a glare-free, good lighting area.
- Congenital Glaucoma Disease of the eye marked by increased intraocular pressure which tends to reduce vision and leads to blindness. It is an uncommon disease of early childhood but usually involves both eyes when it is present. It usually results in an enlarged eyeball. Treatment is frequently disappointing although some cases have been considerably benefited. The disease progresses slowly, although in some cases it comes to a spontaneous stop with the preservation of moderately good vision. Ophthalmological treatment and care are essential and may be prolonged in duration. Anything that might cause the child to become tense or over-excited should be avoided. Classroom seating will depend on amount of vision lost.
- Diabetic Retinopathy Usually bilateral, caused by uncontrolled diabetes with changes in the capillary walls, retinal veins; hemorrhages which organize rather than absorb, and the association of these lesions with changes in smaller blood vessels in other parts of the body. Must have early and persistent control of the diabetes by the use of modern dietary methods and especially the proper use of insulin. The longer the diabetic condition avoids control, the more apt is eye involvement to progress. Cuts and injuries should be avoided as healing tends to be slow. Infections, bruises, etc., should be treated immediately. Any sight lost usually can-

not be regained. Doctors' recommendations must be followed implicitly. Classroom seating will depend upon amount of vision lost.

Retinitis

Pigmentosa

A form of hereditary retinal atrophy which produces a gradual and marked constriction in the field of vision leading to blindness. Night blindness, increasing concentric contraction of the fields, and progressive diminution in sight are its subjective symptoms. In early life there is but slight reduction in the extent of the field with good illumination, and central vision is often perfect. But with feeble illumination, the peripheral parts of the retina do not react. On this account the patient cannot find his way about at night, because the field becomes contracted even with good illumination. Finally, in advanced years, central vision becomes poor, but does not usually end in complete blindness. The disease is fairly common and affects both eyes. It is either congenital or develops in childhood. It is hereditary, with or without consanguinity of parents. It often occurs in several members of the same family; frequently other congenital defects, such as deafness and defective intelligence, are present. It may be complicated by other eye abnormalities. Treatment is unsuccessful in arresting the progress.

Static

Congenital

Cataract

Any opacity of the crystalline lens, or its capsule. There are all degrees and many types. Cataracts in children may be hereditary; post-traumatic; due to metabolic disorders, such as diabetes, cretinism (juvenile hypothyroidism) or mongolism or toxic. A classical example is the cataract which occurs in infants whose mother contracted rubella (German Measles) during the first three months of pregnancy. If the child can see at least 20/70 or better, surgery will be avoided as one cannot guarantee a final acuity any better than this. The surgical treatment of such cataracts is nowhere near as successful as those occurring in adults. The procedures employed have a higher incident of post-operative complications than the operation performed on adults. Treatment depends upon the cause of and condition of the cataract, as well as the general health of the eye and child. Good illumination without glare is helpful when the child is reading.

Nystagmus

A constant oscillation or rhythmic jerking movements of the eyes, frequently congenital and associated with amblyopia (poor vision without apparent disease of the eye) and albinism (hereditary absence of pigment in the eyeball, or elsewhere in the body; as a result of this, vision is grossly deficient). The usual infantile cases are not amenable to treatment, though the condition sometimes becomes less marked with advancing years; the correction of errors of refraction (the bending of the rays of light as they pass through media of different density) may be of some benefit. The latter is usually accomplished through wearing glasses. Such children should be allowed more time to read than other classmates. Patience must be exercised in teaching them as nervousness tends to increase the movement of the eyes.

Retrobulbar
Fibroplasia

A disease of the retina (corresponds to the film of a camera), occurring almost exclusively in premature infants. It results from prolonged use and/or from high concentration of oxygen during the first weeks of life. School placement will be dependent upon whether or not some residual vision remains and the degree of remaining vision. Such children must rely, to a great extent, upon their tactal, auditory, and kinesthetic experience and be given opportunities to use these senses in a variety of daily experiences. They should not be over-protected.

Strabismus

Also called "crossed eyes," "squint," "cast," "wall-eyed." Whatever it is called, it still means that an eye is in trouble. It causes a loss of visual and social function and should be treated as soon as it is noticed. The eyes will not straighten themselves. Some factors responsible for strabismus are nearsightedness and farsightedness, faulty nerve coordination, defective muscles and inflammation or hemorrhages in the muscles or nerves. Any one of these causes can prevent the two eyes from working together. In some babies, eye coordination does not begin to function until about three months. An ophthalmological examination at this time can rule in or out any refractive error or any disease of the eye which, by destroying vision in one eye, will often lead to the development of strabismus. Treatment may involve any one or a combination of occlusion (placing a cover or "patch" over the eye), glasses or surgery. Defective eyesight resulting from crossed eyes may affect a child's appearance, with resulting psychological and social problems. It will retard his progress in school simply because he does not see well with both eyes. Treatment must not be postponed.

Coloboma

A congenital cleft or defect due to the failure of the eye to complete growth of the part affected. These may involve the iris, retina or choroid. For coloboma of the lid, plastic surgery is the usual form of treatment. Visual loss will depend upon the part affected. Glare should be avoided and the eyes will require rest. Frequently, tinted glasses may be prescribed.

Retinal
Detachment

A separation of the retina from the choroid. The name usually refers to a separation of serum (serous or simple detachment), but detachment may also occur as a result of choroidal hemorrhage, exudate, or tumor. There is a loss in the field opposite to the detachment, causing the appearance of a dark cloud before the eye and a corresponding field defect; central vision is preserved at first, but is lost if the macula is included; with total detachment even perception of light may be abolished. Retinal detachment may be due to disease or injury; occasionally no cause can be found. Myopia and myopic degeneration are factors in about one-half of the cases of serious detachment. Operation is indicated except in cases associated with nephritic toxemia, in hopeless cases, and in certain infrequent examples of stationary detachment. The child is cau-

tioned to avoid bumps and blows upon the head, also jolts. Stooping, lifting weights, may precipitate detachment in a predisposed eye. Early operative treatment is essential. During the past few years more than one-half of the cases so treated have been reported as cured.

Albinism

An hereditary absence of pigment in the iris, usually associated with lowered visual acuity, nystagmus, and photophobia (an intolerance of light). Tinted glasses are usually recommended as treatment and children should sit away from classroom windows to avoid glare or too bright light.

Congenital Amblyopia

Poor vision usually affecting one eye, may be due to retinal hemorrhages in the newborn, or without apparent disease of the eye. With normal fundus and good vision there is inability or difficulty in recognizing printed or written words, although auditory memory is normal. Detected early in life, much improvement follows training.

Toxoplasmosis

A disease caused by infection. In infants and children the disease is characterized by disseminated encaphalomyclitis accompanied by ventricular enlargement, cerebral calcification and bifocal retino-choroiditis. Treatment is aimed at the causative factor to eliminate the disease and should be instituted as soon as possible.

INFECTIONS

Conjunctivitis

Inflammation of the mucous lining the eyelids and covering the front part of the eyeball. Usually associated with discharge from the eye which is highly contagious, swelling, tenderness, and itching. It is a serious condition requiring immediate diagnosis and treatment in order that the underlying cause may be eliminated or controlled. Hygienic living conditions must be obtained and a high level of general health.

Iritis

Inflammation of the iris. It may be acute or chronic. Many cases terminate favorably, especially when subjected to proper treatment early. Chronic cases present very mild inflammatory symptoms, or the latter may be almost absent. Certain forms have a tendency to recur; relapses are common, especially where the cause has not been eliminated. It may be caused by a systemic disorder, a toxin derived from a septic focus in some part of the body (such as from tonsils, diseased teeth, nose and nasal accessory sinuses, etc.). In many cases the cause is unknown. Treatment may include the use of drugs, local heat, rest and protection from light, foreign protein, and treatment of the etiological factor.

Sty A circumscribed, acute inflammation at the edge of the lid, caused by a staphylococcus infection. They are frequently associated with a lowered state of health and anemia. Hot compresses applied to the affected area will bring the pus to a head. Evacuation of the pus should be performed by an ophthalmologist. The general health should be improved, the diet regulated, anemia treated, and tonsils and adenoids investigated. Ointments are frequently prescribed for local application.

Chalazion An inflammatory enlargement of one of the meibomian glands in the eye-lids resulting from infection. The process often develops slowly with insignificant or no symptoms until it has reached the size of a small or large pea. Then it presents a noticeable, circumscribed swelling which feels hard. They can be annoying on account of disfigurements, or on account of irritation. When small, they can be removed by application of prescribed ointments, followed by massage and hot compresses. When larger, operation is indicated.

RECOMMENDED PROCEDURES IN CONTACTS WITH BLIND PEOPLE

KEEP IN MIND that not all blind individuals are totally blind. Some have a limited amount of usable vision. Some have vision which varies considerably from time to time.

SPEAK NATURALLY. Don't give directions from a distance. If you use gestures, continue to express yourself in this way. Don't alter your vocabulary in deference to the blind people. You may use the word "see." Seeing is a verbal image that communicates itself as effectively to the blind as to the sighted. The words "blind" or "blindness" are parts of speech and are as appropriately used with blind people as the sighted. Don't confuse a lack of vision with an inability to communicate. Don't raise or alter your normal tone of voice. When others are present in a group of blind or sighted, address the blind person by prefacing your remarks with his name or by lightly touching him on the arm.

WHEN YOU ENTER the presence of a blind person, speak promptly and identify other persons for him. When you leave the room, say that you are leaving, for often he is not aware of your departure and will go on talking.

SPEAK FREELY of your surroundings, as this sharpens a blind person's ability to identify sounds with objects, and to familiarize him more completely with his surroundings. Tell him where he is sitting in relation to others, so that he will be able to direct his speech to the individual with whom he is conversing.

BLIND PEOPLE MEMORIZE the position of chairs, tables, ash trays and other familiar room furnishings. Never change the arrangement of a familiar room without an explanation of the new arrangement.

IF YOU HAND a blind person anything - a cigarette, juice, a cup of coffee, etc., speak before you place it in his hand, as this will obviate fumbling and spilling. In describing the position of food on a plate, visualize the plate as a clock and describe the position of the various items in relation to 3, 6, 9 and 12 o'clock.

WHEN WALKING with a blind person, offer him your arm rather than taking his and guide him simply and directly to his destination. You should stop when you are to ascend or descend stairs, curbs, etc., so that he may be prepared for the change. You may need to tell him of the change. In guiding him to a seat, place his hand on the back of the chair and he will use this as a guide in seating himself. In general, let him know his related position to objects through his sense of touch, and usually he is capable of doing the rest.

BLIND PEOPLE LIKE to know about the beauty that surrounds them. They enjoy hearing detailed descriptions of flowers, colors, and what people are wearing. They appreciate your comments about their appearance, as any friend would after you got to know him well.

SUMMARY FOR REFERRAL

(Sample Form)

The following outline has been prepared for referrals to Bronx House. It may be used as a general guide, and any other information which the worker feels would be of value should be included.

Before an actual referral is made, telephone contact should be made with the Intake Worker at Bronx House for information on groups which might be available for the client.

Name: _____

Father's Name: _____

Address: _____

Mother's Name: _____

School and grade: _____

Siblings; ages: _____

Birthdate: _____

Previous group affiliations:

1. Worker's purpose in making this referral

Give specific examples of the child's needs and worker's reasons for feeling child is ready for a group experience.

How does child feel about the referral?

2. Relationships with other children

- (a) How does he get along with siblings?
- (b) How does he get along with children in the neighborhood ... in school ... in camp? etc.
- (c) Under what conditions does he relate to others as leader, as follower?
- (d) Does he have special friends? What kind of children does he gravitate to?
- (e) Are his friendships constructive? Destructive?

3. Relationships to adults

- (a) What is his relationship to parents and other adults in the home?
- (b) What is parent's attitude to child in terms of acceptance, rejection, understanding?
- (c) What kind of supervision has parent given child?
- (d) Had dependency or independence been forced on child?
- (e) How does parent feel about referral to Bronx House?

4. School relationships

- (a) How does child relate to teachers?
- (b) What is his reaction to authority at school?
- (c) How does he accept routines and discipline of group?

SUMMARY FOR REFERRAL (Continued)

5. Interests and aptitudes

- (a) What is child's general functioning on an intellectual level?
- (b) What is his general functioning on a physical level? Are there any health problems?
- (c) What interests and hobbies does he have, actually and potential?
- (c) How does he differ in interests from the average child his age?

6. Summary of agency contact

- (a) Problem at time of referral
- (b) Family background
- (c) Changes during treatment

NOTE: It is suggested that Bronx House take the initiative for telephone or other conferences as needed on child's adjustment in the group during first two months after his acceptance. At the end of 6 months, a conference should be scheduled so that group leader, supervisor and case worker may discuss child's adjustment in the group, individual problems in therapy, and mutual handling of the child.

Name of Worker _____

Date _____

Agency _____

Address _____

RECORDING

LEADER'S RECORDING

Relationship

- 1) How he develops relationships (makes friends)?
- 2) How he handles hostility - his own - other children's?
- 3) How he reacts to references to his blindness (handicap)?
- 4) What changes have you observed in relation to his attitudes to himself and to others?

Program

- 1) 1) Child's most favored interests - least favored.
- 2) Attitudes toward learning new skills.
- 3) What changes have you observed?

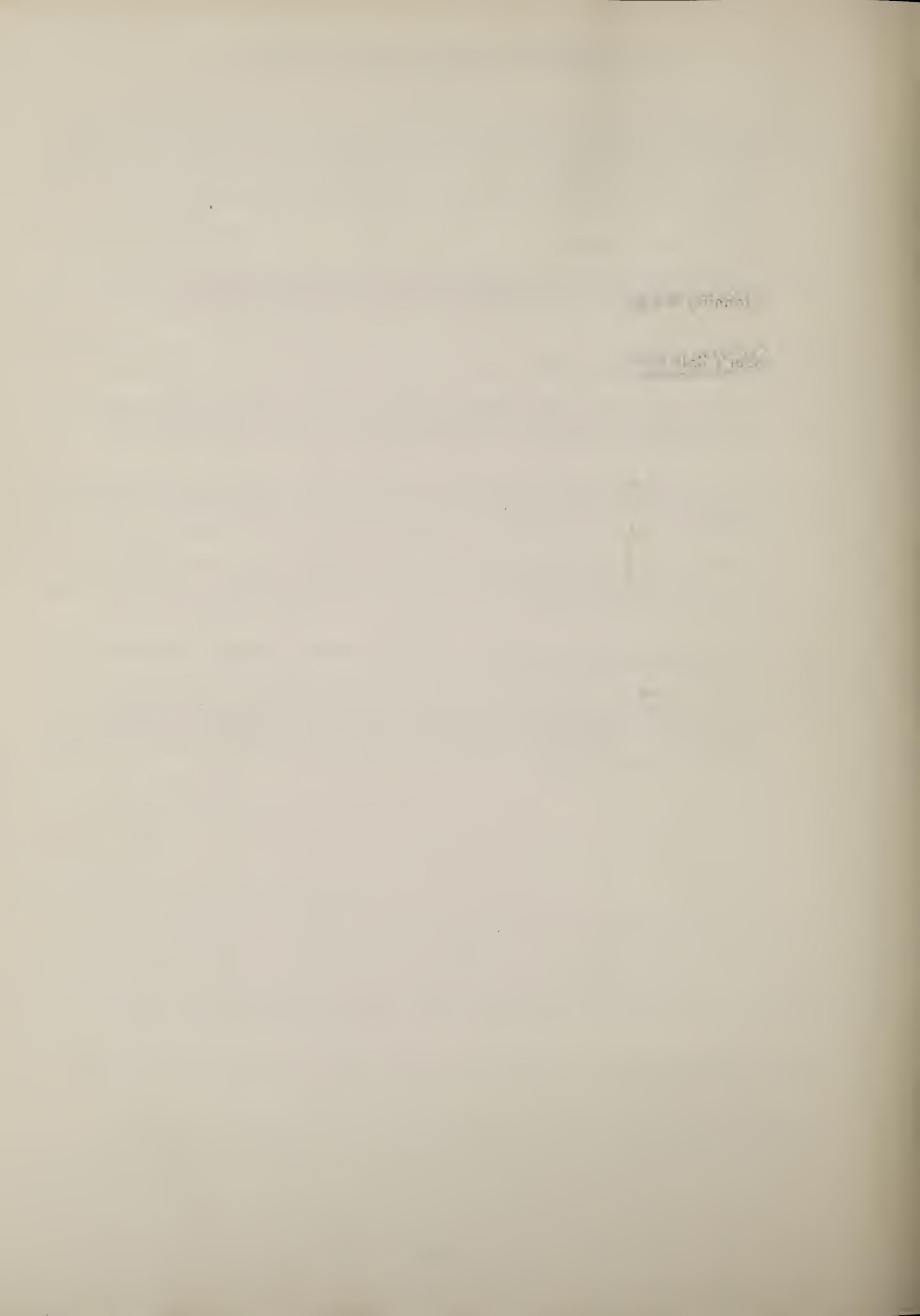
Routines

- 1) Mobility:
 - a- Getting on and off vehicles
 - b- Maneuvering stairs
 - c- Getting in and out of rooms, buildings and other program areas
- 2) Use of materials, supplies and equipment
- 3) Eating, dressing, toileting, resting

SUPERVISION RECORDS

How the supervisor helps the supervisee understand working with handicapped children in a community center setting.

- 1) What concerns are being brought to supervisor? How are they being brought? Who initiates?
- 2) How are they being handled?
- 3) How does the supervisor help the supervisee handle special problems related to the handicap?
 - a- dependency
 - b- mobility
 - c- relationships



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Saul, Shura

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Group work services for blind
children in sighted settings.

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